

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

TABLE OF CONTENTS

400	Introduction
401	Philosophy of Adoption and Birth Parent Services
410	Birth Parent Services - Intake
410.01	Birth Parent Services - Needs Assessment
410.02	Birth Parent Services - Service Plan
410.03	Birth Parent Services - Maternity Home Care
410.04	Birth Parent Services - Counseling for Maternity Home Clients Not Considering Adoption - Service Provided Only at Request of Florence Crittenton
410.05	Birth Parent Services - Services to Fathers
410.06	Birth Parent Services - Post-Placement Services To Birth Parents
411	Voluntary Placement
411.01	Foster Care for Infants Released for Adoption or Placed Voluntarily Pending An Adoption Plan
412	Parental Rights
412.01	Relinquishment - Children Not in Foster Care
412.02	Termination of Parental Rights - Children Who Enter Care Through Relinquishment
412.03	Termination of Parental Rights - Reports To the Court
413	Assessment for Adoption - Referral Accepted for Adoptive Placement Preparation
413.01	Assessment for Adoption - Referral Accepted for Assessment/Recruitment Only
414	Recruitment
415	Preparation for Adoption
415.01	Child Resistant to Adoption
415.02	Life Book
416	Background Summary - Infant (Birth to 12 Months)
416.01	Background Summary - Child Older than 12 Months
417	Selection of Families for Placement of Infants (Birth - 12 Months)
417.01	Selection of Families for Placement of Children Older than 12 Months
418	Placement Process - Separation of Siblings
418.01	Placement Process - Children of American Indian Ancestry (Indian Child Welfare Act) (ICWA)
418.02	Placement Process for Infants (Birth - 12 Months)
418.03	Placement Process for Children Age One to Three Years
418.04	Placement Process for Children Age Three Years and Older
418.05	Placement Process - Openness In Adoption
418.06	Placement Process - Ongoing Contact with Birth Family and/or Other Significant People
418.07	Placement Process - Canceling Proposed Placement After Visitation Has Begun
419	Post-Placement Services
419.01	Post-Placement Services - Extension Beyond Twelve (12) Months
420	Disruption

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- 420.01 Removal of Child from Adoptive Home - Adoptive Parents Do Not Agree to Removal
- 421 Finalization of the Adoption
- 422 Adoption Preservation Services
- 423 Post-Legal Services to Adult Adoptees, Birth Families, and Adoptive Families - Non-identifying Information
- 423.01 Post-Legal Services to Adult Adoptees, Birth Families, and Adoptive Families - Reunion Register
- 424 Application to Adopt
- 424.01 Application to Adopt - DSS Employees
- 424.02 Reapplication to Adopt
- 424.03 Application to Adopt - Fingerprinting Reviews of Adoption Applicants
- 424.04 Application to Adopt - Fire Inspections
- 425 Adoptive Home Assessment - Approval
- 425.01 Adoptive Home Assessment - Denial
- 425.02 Approved Adoptive Home Record - Updates
- 425.03 Approved Adoptive Home Record - Pending Status
- 425.04 Approved Adoptive Home Record - Closure
- 425.05 Adoptive Home Assessment - Providing Copy to Adoptive Parent
- 426 Foster Parent Adoption
- 427 Foster Care Review Board - Child has Plan of Adoption and Foster Care has Case Call Management
- 427.01 Foster Care Review Board - Child has Plan of Adoption and Adoption has Case Management
- 428 Judicial Review - Child in Foster Care with Plan of Adoption - Foster Care has Case Management
- 428.01 Judicial Review - Adoption has Case Management
- 429 Medical Consent
- 429.01 Medical Consent - Parental Rights Have Not Been Terminated Or Relinquished and Agency Does Not Have Court Authority To Consent to Major Medical/Surgical Treatment
- 429.02 Medical Consent - Parental Rights Have Been Terminated or Relinquished or Agency Has Court Authority to Consent to Major Medical/Surgical Treatment
- 429.03 Medical Consent - Medically Fragile Children
- 429.04 Medical Consent - Voluntary Placement
- 430 Interstate Compact on Adoption - South Carolina: The Receiving State
- 430.01 Interstate Compact on Adoption - South Carolina: The Receiving State - Post-Placement Supervision Request Only, Family Assessment Completed by Licensed Private Agency
- 430.02 Interstate Compact on Adoption - South Carolina: The Sending State
- 430.03 Interstate Compact on Adoption - Requesting Post Placement Services From Another State
- 431 Court Ordered Adoptive Home Studies
- 432 Adoption Expenses - Waiving or Reducing
- 433 Adoptive Placement Checklist
- 434 Background Summary Outline
- 435 Comprehensive Child Adoption Assessment

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- 436 Separation of Siblings - Issues to Consider
- 437 Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation Outline
- 437.01 Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation Instructions
- 438 Reapplication Summary Outline
- 439 Guidelines for Denial of Adoptive Family Approval
- 440 Adoption Expenses
- 441 Medical Consent Cover Letter Requesting Consent from the County Director, MTS Director, MTS Regional Director or Adoptions Administrator
- 441.01 Medical Consent Cover Letter Requesting Medical Consent from the State Director
- 442 Adoption Subsidy Handbook
- 442.01 Introduction
- 442.02 Considering Adoption Subsidy
 - 442.02.01 Special Needs Definition
 - 442.02.02 Efforts to Place without Adoption Subsidy
 - 442.02.03 The Four Kinds of Subsidy
 - 442.02.04 Other Funding Sources
- 442.03 Evaluating the Need for Adoption Subsidy
 - 442.03.01 Adoption Subsidy
 - 442.03.02 Negotiation of the Adoption Subsidy
 - 442.03.03 Other Resources
- 442.04 Adoption Subsidy Summary
- 442.05 Eligibility
 - 442.05.01 Federally Funded Adoption Assistance (IV-E)
 - 442.05.02 Supplemental Benefits
 - 442.05.03 Supplemental Benefits for Medical Assistance (Medical Subsidy)
 - 442.05.04 Nonrecurring Costs
- 442.06 Post Legal Requests for Subsidy
 - 442.06.01 Post Legal Request for Supplemental Benefits and/or Supplemental Benefits for Medical Assistance
 - 442.06.02 Appeals
 - 442.06.03 Appeals Procedure

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

400 Introduction

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The Child Welfare League of America (2000) defines adoption as "...the social, emotional, and legal process through which children who will not be raised by their birth parents become full and permanent legal members of another family while maintaining genetic and psychological connections to their birth family."

The Department offers statewide adoption services to:

1. Parents who are considering the release of their child(ren) for adoption;
2. Children who are voluntarily released by parents or the court has given custody to the Department, and who have a permanent plan of adoption; and
3. Persons who wish to adopt children.
4. Adoptive families who have finalized an adoption and are experiencing problems related to the adoption.
5. Adult adoptees, adoptive families, birth parents of the adoptee who request nonidentifying information or reunion register services. Reunion register services are also provided to biological siblings of the adoptee.

In all adoption cases, the Department has the responsibility to give as much protection as possible to the child, the biological parent, and the adoptive parents; to insure confidentiality of service; and to safeguard records. State law gives DSS the responsibility to provide adoption services for children in foster care and the authority to consent to adoption after relinquishment or termination of parental rights.

401 Philosophy of Adoption and Birth Parent Services

Revision Number: 04-03, Effective Date: 07/23/2004

Adoption and Birth Parent Services practice is based on the following principles:

1. Every child should be able to remain with, or if placed in the Department's custody to return to, his/her biological parents. When this is not possible, it is the responsibility of the Department to explore for those children in its custody:
 - A. The suitability and commitment of relatives to adopt; and
 - B. Permanent placements with non-related adoptive families.
2. Adoption services are available to all children in the Department's custody for whom the Department has assessed that adoption is an appropriate placement plan. The Department is committed to providing a healthy environment during the period of substitute care, linking the child with a permanent family as quickly as possible and providing effective services both prior to and after finalization. The Department will place children only after prior assessment and preparation of the child, birth parents and the adoptive parents. To achieve these goals, the adoption specialist's attitude must reflect a commitment to the provision of all necessary services.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

3. A relinquishment will be taken only if the Department determines that an adoptive resource is likely to be identified for the child. In rare cases, a relinquishment may be taken even if an adoptive resource is not likely, depending on the child's best interest.
4. Children may be placed in pre-adoptive homes prior to the resolution of all legal barriers, when such placements are deemed to be in the best interest of the child.
5. The Department has a responsibility to secure adoptive homes for children with special needs. The Department will utilize all available and appropriate financial assistance programs to effect the adoption of children with special needs. Priority will be given to families who state a preference in adopting children with special needs.
6. Every child free for adoption or who can be freed will not be denied the opportunity to have a permanent family due to age, religion, race, ethnicity, residence or handicaps. The Department is committed to seeking an adoptive family for any child for whom adoption is the permanent plan.
7. Supportive services must be made available for adoptive placements to be successful, especially those in which children with emotional and/or physical handicaps have been placed. Services will be provided which are deemed to be in the child's best interest and which meet the identified needs of the child. Supportive services will be provided by the adoption specialist and include, but are not limited to:
 - A. casework counseling
 - B. parent education
 - C. support groups
 - D. linkages to other resources
8. The Department is committed to providing services to adoptees, birth parents and adoptive parents following the finalization of the adoption.
9. Children should be told of their adoption by their adoptive parents. The Department will be available to provide support in carrying out this responsibility, if requested.
10. Siblings should be placed together whenever possible. Exceptions will be considered when the circumstances indicate that separate placements are in the best interest of the siblings involved. Clear and convincing rationale must be documented if separation of siblings is recommended. This recommendation must include reference to and copies of any evaluations by allied professionals and siblings' preferences, if age appropriate. Should siblings be separated, provisions will be made for allowing some level of continued contact, if possible.
11. Children have the right to permanency through adoption on a timely basis. The Department will not delay or deny a decision to seek termination of parental rights or otherwise to free a child for adoption on the basis of race, color, or national origin nor delay or deny an adoptive placement on the basis of race, color, or national origin of the foster/adoptive parent or the child. The Department will not deny the opportunity to become an adoptive or foster parent because of the family's race, color, or national origin.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

12. In order to enhance the permanence of the placement and insure the well being of the child, the Department will provide post-placement services between the time of the adoptive placement and the issuance of a decree of adoption.
13. To assure safety of the children, staff must determine the composition of the household. Every member of the household must be part of the assessment process. Completed assessment must include, but is not limited to, how household members relate to one another and to the foster child. It also includes whether a member of the household is a paramour of the adoptive parent.
14. Foster parents who have been approved for adoption will be given priority consideration as adoptive parents for the child in their care if the child has been in the foster home for six months or longer, and the child is legally free for adoption, and adoptive placement with the foster family is deemed to be in the best interest of the child by the Department. Foster parents must be included in the preparation and placement process if placement is to be outside the foster home, when this is deemed to be in the best interest of the child involved.
15. Birth Parent services will be provided upon request, without regard to race, color, national origin, physical or mental condition, economic status, age or marital status. Eligibility to receive services is not dependent on the decision of birth parents to release a child for adoption. The Department will respect birth parent preferences in the selection of an adoptive family in so far as they are in the best interest of the child involved.
16. The Department has the following general responsibilities to children:
 - A. To provide services necessary to know and understand the child and the child's needs.
 - B. To provide a healthy environment during the period of substitute care.
 - C. To select an adoptive family as quickly as is consistent with good planning.
 - D. To prepare the child and the family for placement.
 - E. To provide effective post-placement services to the family.
 - F. To provide post-adoption services to the family, as appropriate.
 - G. To utilize funding available for purchase of adoption services from other agencies, public and private in order to increase available adoptive resources for children in the Department's custody.
 - H. To provide financial assistance when applicable and available.
 - I. To support and counsel the child experiencing a disruption and to seek another adoptive placement as quickly as is consistent with good planning.
17. The Department has the following general responsibilities to birth parents:
 - A. To provide information on the following options:
 - 1) Parenting their child with the help of supportive services;
 - 2) Voluntarily placing their child in foster care on a limited basis; and
 - 3) Relinquishing their child for adoptive placement.
 - B. To insure that they have knowledge of and access to available community services that meet their needs.
 - C. To assure confidentiality.
 - D. To be responsive to their requests regarding placement of their child to the extent possible.
 - E. To provide counseling and support.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

18. The Department has the following general responsibilities to adoptive families:

- A. To provide thorough and accurate information regarding the adoption process.
- B. To involve them in the assessment process and complete the assessment on a timely basis.
- C. To provide accurate and thorough information, to the extent known by the Department, regarding children available for adoption.
- D. To conduct reviews of the family circumstances every six months while the family is approved and waiting for adoptive placement.
- E. To provide appropriate support during the entire adoptive process.
- F. To inform them of the qualities, characteristics, problems and needs of any child they are adopting, as are known to the Department.
- G. To provide post-placement and post-adoption services that support the family following adoptive placement.

410 Birth Parent Services - Intake

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Adoption Specialist

- 1. Receives the request for services from the birth parent;
- 2. Responds by telephone or in writing to the client;
- 3. Assures client of confidentiality and the agency's willingness to provide services, outlines the services available and general procedures for receiving the services;
- 4. Obtains as much identifying information as the client feels comfortable giving, i.e. name, address, telephone numbers, and a time for telephone calls;
- 5. Refers client to their county Department of Social Services or other appropriate agency if not considering adoption services; and
- 6. Records the information on DSS 30103, Central Intake Form, and updates CAPSS.

410.01 Birth Parent Services - Needs Assessment

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Adoption Specialist

- 1. Reviews information on DSS 30103, Central Intake Form, and contacts the client by phone to schedule an interview. Client need will determine the urgency of scheduling the first interview;
- 2. Conducts the first interview at a location convenient to the client;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

3. Determines client's understanding of the problem;
4. Explains the agency, including the services that can be provided;
5. Assures the client of the right to confidentiality;
6. Reviews/documents the client's family unit, resources and plans;
7. Explains to client the need to involve the child's father in making a permanent plan for the child;
8. Counsels on options available which include keeping and parenting the child with or without support from the child's father and/or other family members, or the plan of adoption;
9. If the client expresses an interest in abortion, makes a referral to Planned Parenthood or other health care professional (see #10 below if client is a minor);
10. Counsels with minor clients on involving their parents in the process. If the client expresses an interest in abortion and parent cannot or will not consent or minor does not wish to involve parent, provides DSS Brochure 2476, Consent for Teenage Abortion, which explains the procedures for obtaining court approval for an abortion;
11. Provides assistance as required; and
12. Schedules the next interview.

410.02 Birth Parent Services - Service Plan

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Adoption Specialist

1. Develops the DSS 30104, Service Plan, within 30 days of the first interview. The Service Plan will include:
 - a. Statement of birth parent's view of the situation;
 - b. Identification of birth parent's needs;
 - c. Setting goals, objectives and strategies for meeting birth parent's needs;

Adoption Specialist Birth Parent

2. Signs the Service Plan, which is developed jointly by the Adoption Specialist and birth parent;

Adoption Specialist

3. Documents in the case record if the Service Plan is not signed by the birth parent;
4. Assists birth parent in completing the DSS 1575, Family History Information;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

5. Evaluates and revises the Service Plan at regular intervals with the birth parent; and
6. Completes the closing summary when no further services are needed or requested by the client. Updates CAPSS.

410.03 Birth Parent Services - Maternity Home Care
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Adoption Specialist

1. Provides information on maternity homes available to South Carolina residents;
2. Counsels with client regarding maternity home care and the services provided. Prepares client for the possibility of having a new DSS worker, if appropriate.
3. Opens case for birth parent services on CAPSS;
4. Schedules the preadmission appointment with provider's intake worker;
5. Prepares the social summary;
6. If the client is a minor and is going to Florence Crittenton Services in Charlotte, North Carolina or to another maternity home out of state, sends a copy of the social summary and a cover letter stating the situation with a request for Interstate Compact approval to the Interstate Compact on the Placement of Children (ICPC) in State Office;
7. Arranges transportation for the client when approval from the provider and ICPC (if necessary) is received;
8. If requesting birth parent services from another adoption office, sends request for services to the Adoption Administrator in the office serving the appropriate maternity home. Sends essential case materials, as needed or requested;
9. Receives the discharge summary from the provider;
10. Provides direct services to client for up to 90 days after discharge;

Region A or Region C Adoption Specialist

11. Counsels with birth mothers during their stay in maternity homes;
12. Takes relinquishment and/or voluntary placement, if requested; and

Adoption Specialist

13. If child is relinquished or voluntarily placed in foster care, transports the child to the foster home.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

410.04 Birth Parent Services - Counseling for Maternity Home Clients Not Considering Adoption - Service Provided Only at Request of Florence Crittenton

Revision Number: 03-03, Effective Date: 11/18/2003

Region A or Region C Adoption Specialist

1. Receives request for services from Florence Crittenton staff;
2. Provides one counseling session to client in order to explain adoption and ensure that client knows it is an available option;
3. Opens case for birth parent services on CAPSS if services will be provided;
4. Continues adoption counseling at client's request. Completes the Case Plan with the birth parent and signs it, along with the client;
5. Updates CAPSS as necessary.

410.05 Birth Parent Services - Services to Fathers

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Make diligent efforts to locate the man (men) whom the birth mother has named as possible fathers to the child. In cases of alleged criminal sexual conduct or incest, determines whether this putative father exhibited the types of conduct that would make his consent necessary before an adoption can proceed (see Section 20-7-1690 of SC Code of Laws).
 - a. If his consent is required, this father can either consent to the adoption by signing a relinquishment, or his rights will have to be terminated by the court (TPR);
 - b. If his consent is not necessary, there is no need to pursue either a relinquishment or TPR;
 - c. If the child is conceived as a result of criminal sexual conduct or incest, the putative father is not entitled to notice of the proposed adoption. However, he may still have to consent (see Section 20-7-1690 of SC Code of Laws);
2. If the child is conceived as a result of reported criminal sexual conduct or incest, obtains from the birth mother a written affidavit attesting to the facts and details surrounding the incident that resulted in the pregnancy. If birth mother is a minor, makes a report to the police;
3. Documents in the case record that reasonable efforts were made to locate any named fathers, including:
 - a. Checking the local phone directory and vehicle registration rolls;
 - b. Checking with known relatives of the father;
 - c. Checking with known employers of the father;
 - d. Checking with local utilities to see if the father is receiving gas or electric services;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- e. Checking DSS records to see if the father is receiving or has received any assistance; and
 - f. Making a Diligent Search referral by completing the modified DSS Form 2738, "Foster Care - Child Support Referral Form;
4. Provides services if the birth father is receptive;
5. Explains the options available to the birth father:
- a. Making a plan to parent the child himself. Advises him that he has the right to visit and the obligation to provide support;
 - b. Signing a DSS 30115, Denial of Paternity;
 - c. Signing a DSS 30119, Waiver of Notice;
 - d. Signing a DSS 3093, Relinquishment for Adoption;
 - e. Refusing to cooperate - if a birth father refuses to cooperate in choosing any of the options listed above, he must be informed that he may be noticed of the proposed adoption via newspaper publication. If his consent is required and he will not consent, then he will be part of a court action to terminate his parental rights;
6. Writes any named father at least twice a month, informing him of his obligation to support the child and his rights to visitation with the child; and
7. Checks Child Support Enforcement (CSE) to see if there is an open case. If not, makes a referral to CSE.

410.06 Birth Parent Services - Post-Placement Services To Birth Parents

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

- 1. Continues counseling with birth parent for a maximum of ninety (90) days after the relinquishment has been signed;
- 2. Provides birth parent with developmental information, photographs and any other non-identifying information that the adoptive family is willing to share prior to finalization;
- 3. Prepares the closing summary and forwards the case to the adoption office that is supervising the infant's placement; and
- 4. Updates CAPSS.

411 Voluntary Placement

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

1. Counsels with client who is considering adoption, but needs additional time to decide. In no case accepts a voluntary placement if such a placement does not appear to be in the child's best interest. If the family wishes to voluntarily place because they are experiencing problems with the child, makes every effort to assist by helping the family to obtain supportive services from the county DSS office or other appropriate resource. Makes a referral to the county DSS Child Protective Services unit if abuse or neglect is suspected;
2. Accepts voluntary placement, DSS Form 30130, on newborns still in the hospital if birth parent is considering adoption. A copy is sent to the county Department of Social Services in which the birth parent resides;
3. Transfers the case to the county Department of Social Services for permanency planning after 30 days if the birth parent is still undecided about adoption or return home;
4. Refers the case to the county Department of Social Services in which the birth parent resides when the Adoption Specialist feels a relinquishment is inappropriate; and

Adoption Supervisor

5. When a birth parent wants to relinquish a child, contacts the adoption office, which serves the county of the birth parent's residence. The county supervisor and adoption supervisor decide if a relinquishment is appropriate or schedule a staffing if more discussion is needed.

411.01 Foster Care for Infants Released for Adoption or Placed Voluntarily Pending An Adoption Plan

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Adoption Specialist

1. Contacts the county Department of Social Services Licensing Unit to request a foster home if a specialized foster home for short term placement cannot be identified;
2. Transports the infant to the foster home and has the DSS 1531, Foster Parent Contract, signed. If using a county foster home, the licensing worker must be informed of the date the infant is to be placed in the home and the approximate length of time the infant will be there prior to adoptive placement; and
3. Updates CAPSS.

412 Parental Rights

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Reviews the record to determine which of the following parental rights have been relinquished, terminated or otherwise resolved. All of the following parental rights, if applicable to the child's specific situation, must be resolved before an adoption can be finalized:

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- a. Biological mother;
 - b. Biological father (may also be referred to as the putative father);
 - c. John Doe, if the name of the biological father is unknown;
 - d. Legal father. If the birth mother is married at the time of the child's birth, her husband is the presumptive legal father, even if he is not the named biological father, and his parental rights must be resolved;
2. If one of the parties (except John Doe) listed above is deceased, requests a certified copy of the person's death certificate from DHEC, Bureau of Vital Statistics, if the person was born in South Carolina. If the state of birth is not South Carolina, requests the death certificate from the division of state government that tracks births and deaths; and
 3. Consults with appropriate county DSS attorney who serves the child's county of residence if there is any question as to whose rights need to be resolved. This should be done as soon as adoption becomes the plan in order to avoid any problems later on.

412.01 Relinquishment - Children Not in Foster Care
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Provides intensive counseling to client on alternatives to relinquishing the child for adoption. In no case takes a relinquishment if it does not appear to be in the child's best interest and there is a reasonable expectation of making an adoptive placement. If the family wishes to relinquish because they are experiencing problems with the child, makes every effort to assist by helping the family to obtain supportive services from the county DSS office or other appropriate resource. Makes a referral to the county DSS Child Protective Services unit if abuse or neglect is suspected;
2. Provides:
 - a. DSS Brochure 2412, The Adoption Option;
 - b. DSS Brochure 2402, Problem Pregnancy Here's Help, if child is not yet born;
3. Explains the options available to client on Openness in Adoption ;
4. If the client was previously unknown to DSS, does not take a relinquishment until forty-eight (48) hours after furnishing the DSS Brochure 2412, The Adoption Option;
5. Explains to client the need to identify and involve the birth father in planning for the child. If the client refuses to divulge the father's identity and decides to relinquish her child, informs the client that she will have to complete DSS 30118, Refusal to Name the Natural Father of Born Child;
6. If the birth mother is still hospitalized, checks with a doctor or nurse to insure that the client is not on any medication which might impair judgment, and documents the record;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

7. Completes, in cases of criminal sexual conduct or incest, an affidavit stating that the pregnancy resulted from criminal sexual conduct or incest (see page reference number 450.05 for additional information on the affidavit and the alleged father's consent). If the birth parent is a minor, makes a report to law enforcement and to the county Child Protective Services unit, if abuse or neglect is suspected. If the birth parent is an adult, informs the client of her option to report to law enforcement;
8. Explains thoroughly to the client the DSS 3093, Relinquishment for Adoption. Gives client a copy of the form to review;
9. Provides two witnesses, one of whom must be a Certified Investigator, to witness the birth parent sign the relinquishment in the presence of a notary. Persons who may serve as witnesses include, but are not limited to:
 - a. Other agency staff members;
 - b. Other professionals such as nurses, maternity home staff, etc.
 - c. Any third party 18 years of age or older,
 - d. Relatives of the birth parents, unless they are an adoptive resource (in this case, obtain another witness);

If the witness is an attorney, records his/her bar number under the attorney's signature. If the witness is a certified investigator or other professional who has an identification number, records it on the relinquishment under the person's signature.

10. If the client's preferred language is Spanish,
 - a. Obtains an interpreter by consulting the Client Special Service Coordinator, who has a list of interpreters. The interpreter reviews the Relinquishment, DSS Form 3093 SPA, with the birth parent, and signs the DSS 30203 SPA, Affidavit for Spanish Interpreter;
 - b. Obtains a copy of the interpreter's *Vita* which specifies the interpreter's training and credentials to read and interpret Spanish;
 - c. Attaches the DSS 30203, Affidavit for Spanish Interpreter, to the Relinquishment (Spanish version, DSS Form 3093 SPA) and files in the case record. Provides a blank copy of the Relinquishment (English version, DSS Form 3093) for the Judges Eyes Only packet and, if requested, a copy of the DSS 30203, Affidavit for Spanish Interpreter;
11. Ensures that the birth parent, in the presence of the two witnesses, the notary public and, if appropriate, the Spanish interpreter, fills out three copies of the relinquishment, and signs all three. Ensures that witnesses correctly sign the relinquishment and witness certification form; and
12. Gives birth parent a copy of the relinquishment that s/he signed and any other forms such as witness certifications.

412.02 Termination of Parental Rights - Children Who Enter Care Through Relinquishment
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Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

1. Determines that the presumptive legal father and/or birth father has failed to:
 - a. If the child is at least six (6) months old, visit the child for a period of at least six months, and the visitation was not prevented by a court order or the party having custody of the child; and/or
 - b. Provide support for at least six months. Support can be financial or material, such as food, diapers, clothing, etc.
2. Documents in the case record that reasonable efforts were made to locate the named father;
3. Prepares the termination of parental rights packet, which includes but is not limited to the following:
 - a. Child's name, date and place of birth, and county of residence;
 - b. Information on presumptive legal father and/or birth father, including full name (include aliases); last known address; all previous residences; all places of employment; date and place of birth; verification of marriage, divorce or death;
 - c. Name of person willing to serve as a Guardian ad Litem for the child;
 - d. Grounds for termination of parental rights;
 - e. Adoption Specialist's full name and title;
 - f. A narrative description of casework services to the father, including all chronological contacts with the father, detailed description of all services provided;
 - g. Any documentation for support and visitation agreements;
 - h. Letters to the father and any certified mail receipts;
 - i. All Foster Care Review Board notices;
 - j. Pertinent medical records and evaluations;
 - k. Expert witnesses' names and addresses, if any;
 - l. Complete information on the child;
 - m. Copies of any relinquishment documents;
 - o. Brief description of the plan of adoption for the child;
4. Informs attorney if:
 - a. GAL needs to be appointed for any defendant if s/he is mentally retarded, disabled or mentally ill, incarcerated or a minor; and/or
 - b. Parent(s) is/are in the military; and/or
 - c. Parent(s) is/are a member of an Indian tribe or eligible for membership [see Adoption and Birth Parent Services manual, "American Indian Ancestry (Indian Child Welfare Act)". NOTE: TERMINATION OF PARENTAL RIGHTS ACTIONS UNDER THE INDIAN CHILD WELFARE ACT (ICWA) HAVE TO COMPLY WITH SEVERAL ADDITIONAL FEDERAL LAW REQUIREMENTS. IT IS CRITICAL THAT ALL OF THEM BE FOLLOWED. FAILURE TO DO SO MAKES ANY SUBSEQUENT ADOPTION SUBJECT TO REVERSAL]; and

Adoption Administrator

5. Reviews the packet and forwards to the local attorney.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

412.03 Termination of Parental Rights - Reports To the Court

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Submits a plan for permanent placement of the child to the court and to the child's guardian ad litem (GAL) within thirty (30) days of the close of termination of parental rights proceedings. If uncertain as to whether an appeal has been taken, consult with the attorney who handled the TPR action ;
2. Submits a report on the implementation of the plan to the court and to the GAL within an additional sixty (60) days; and

Adoption Supervisor

3. Reviews and signs the thirty (30) and sixty (60) day reports to the court and forwards to the court and the GAL.

413 Assessment for Adoption - Referral Accepted for Adoptive Placement Preparation

Revision Number: 05-01, Effective Date: 11/03/2005

Foster Care/MTS Worker and Supervisor

1. Determine that adoption is the primary or concurrent plan or adoption is likely to become the plan and arrange a staffing within 60 days of the child's entry into foster care; or
2. Determine that biological parent(s) is/are not complying with the treatment plan, and that grounds for termination of parental rights (TPR) exist and adoption may be an appropriate plan;

Foster Care/MTS Supervisor

3. Notifies the adoption administrator and requests a staffing between the foster care/MTS worker and foster care/MTS/adoption supervisory staff. Legal staff may also be included;

Foster Care/MTS Worker and Supervisor and Adoption Administrator/Supervisor

4. Reach a joint decision as to viability of adoption;
5. If necessary, staff the child's case prior to a judicial review for a change in case plan to adoption from another plan. However, do not delay the filing of a termination of parental rights (TPR) action pending a permanency planning hearing;

Foster Care/MTS Worker

6. If adoption is the primary plan, proceeds with completion of termination of parental rights (TPR) packet within 30 days of the staffing;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Administrator

7. Assigns case to an adoption specialist;

Adoption Specialist

8. Reviews the child's case record;
9. Meets the child and the foster parent(s)/group caregiver to discuss adoption within 30 days of case assignment;
10. Updates CAPSS, including completion of Child Tracking/Factors (registers child with State Adoption Exchange);
11. Makes a thorough adoption assessment by conducting and documenting face-to-face interviews with the child, foster care providers, and other significant parties within 60 days of acceptance of referral. [Uses the DSS 30231, Child and Family Assessment Services Plan, Part Eight: Out of Home \(Child in State's Custody\)](#) and completes the Child Assessment in CAPSS;
12. Completes [DSS 30231, Child and Family Assessment Services Plan, Child/Youth's Individualized Service Plan](#). Meets with children 12 years and older to discuss the service [plan](#) and has the child sign (or documents why the child did not sign the service [plan](#));
13. Updates and revises [service plan](#) as appropriate, [using DSS 30231, Child and Family Assessment Services Plan, Part Seven: Plan Reviews](#), but no less often than every 6 months. Develops a new case plan every 12 months. [At each review, a safety assessment must be completed](#);
14. Begins child specific recruitment within 90 days if no adoptive family is available, or documents in the case record the justification of an exemption from recruitment;
15. If, at a later date, adoption is determined not to be an appropriate permanent plan, documents compelling reasons for selection of a plan other than adoption, return home or placement with a fit and willing relative; completes a written assessment summary outlining the reasons for the decision; and forwards to foster care/MTS worker/supervisor, recommending an alternative plan; and

Adoption Supervisor

16. Arranges staffing with county foster care supervisor if adoption is thought to be an inappropriate permanent plan for the child after adoption specialist has exercised and documented every reasonable effort to promote and expedite adoptive placement. These efforts include a thorough adoption assessment and child specific recruitment, if appropriate.

413.01 Assessment for Adoption - Referral Accepted for Assessment/Recruitment Only
Revision Number: 05-01, Effective Date: 11/03/2005

Foster Care/MTS Worker and Supervisor

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

1. Determine that adoption is the primary or concurrent plan or adoption is likely to become the plan and arrange a staffing within 60 days of the child's entry into foster care; or
2. Determine that biological parent(s) is/are not complying with the treatment plan, and that grounds for termination of parental rights (TPR) exist and adoption may be an appropriate plan;

Foster Care/MTS Supervisor

3. Notifies the adoption administrator and requests a staffing between the foster care/MTS worker and foster care/MTS/adoption supervisory staff. Legal staff may also be included;

Foster Care/MTS Worker and Supervisor and Adoption Administrator/Supervisor

4. Reach a joint decision as to viability of adoption;
5. If necessary, staff the child's case prior to a judicial review for a change in case plan to adoption from another plan. However, do not delay the filing of a termination of parental rights (TPR) action pending a permanency planning hearing;

Foster Care/MTS Worker

6. If adoption is the primary plan, proceeds with completion of termination of parental rights (TPR) packet within 30 days of the staffing;

Adoption Administrator

7. Assigns case to an adoption specialist;

Adoption Specialist

8. Reviews the child's case record;
9. Meets the child and the foster parent(s)/group caregiver to discuss adoption within 30 days of case assignment;
10. Updates CAPSS, including completion of Child Tracking/Factors (registers child with State Adoption Exchange);
11. Makes a thorough adoption assessment by conducting and documenting face-to-face interviews with the child, foster care providers, and other significant parties within 90 days of acceptance of referral. [Uses the DSS 30231, Child and Family Assessment Services Plan, Part Eight: Out of Home \(Child in State's Custody\)](#), and completes the Child Assessment in CAPSS;
12. Begins child specific recruitment within 90 days if no adoptive family is available, or documents in the case record the justification of an exemption from recruitment; and

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

13. If, after a thorough adoption assessment is completed, adoption is determined not to be an appropriate permanent plan, documents compelling reasons for selection of a plan other than adoption, return home or placement with a fit and willing relative; completes a written assessment summary outlining the reasons for the decision; and forwards to foster care/MTS worker/supervisor, recommending an alternative plan.

414 Recruitment

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Administrator

1. Assists State Office recruitment staff in coordinating recruitment efforts within the counties the adoption office serves;

Adoption Supervisor

2. Ensures that child specific recruitment is conducted for every child for whom an adoptive home is not available and for whom adoption is the permanent plan;

Adoption Specialist

3. If an adoptive family has not been identified within three (3) months of the determination of the child's adoptable status, prepares the child for media recruitment. Prepares recruitment packet to State Office Recruitment with:
 - a. Summary for media recruitment;
 - b. Six (6) color group and individual (suitable for reproduction) photographs;
 - c. Copy of SC Seedlings form; and
 - d. DSS 3011, Release Form for Publicity, if necessary, signed by adoption administrator or copy of recruitment order;
4. Refers child to SC Seedlings simultaneously with sending the recruitment packet to State Office Recruitment, providing two (2) color group or individual photographs (suitable for reproduction) and a completed SC Seedlings referral form with contact information;

Adoption Supervisor

5. Reviews recruitment packet and forwards to State Office Recruitment;

State Office Recruitment

6. Reviews referral and refers child to local photo listing, unless advised that photo listing is not appropriate. Initiates and advises adoption specialist of scheduled recruitment activities. Upon request, provides report on child specific recruitment activities. Refers child to regional and national exchanges within one hundred eighty (180) days of the determination of the child's adoptable status if no adoptive resource is identified;

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

7. Advises State Office Recruitment, in writing, of changes in a child's status within ten (10) calendar days of change;
8. Notifies photo listing and exchanges of status changes. Recruitment Administrator confers with adoption specialist and adoption supervisor on continued recruitment after twelve (12) months of recruitment efforts; and
9. Updates recruitment referrals every six (6) months, providing additional photographs at update and upon request.

415 Preparation for Adoption

Revision Number: 04-10, Effective Date: 12/28/2004

6. Addresses, at a minimum, the following issues with the child during monthly visits (other issues may need to be addressed and should be determined based on the individual needs of each child):
 - a. Helping the child understand why s/he is not living with her/his birth parents;
 - b. Assessment of the child's attachment, resentment, guilt and loss regarding the birth family. Include assessment of sibling attachment and type of contact that will be needed. Include assessment of significant attachments between child and former foster parents for the purpose of possible permanent homes or continuing relationships;
 - c. Receptiveness to adoption;
 - d. Readiness for adoptive placement;
 - e. Development of the child's Life Book;
 - f. Involving the child in the permanent plan. Children 12 years and older will be asked to sign the DSS 30131, Case/ Service Plan Children; and
 - g. Child's preferences in an adoptive family.

415.01 Child Resistant to Adoption

Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist

1. Provides casework counseling to the child, discussing:
 - a. Reasons the child came into care;
 - b. Grief and loss issues regarding the birth family and significant others, as appropriate;
 - c. Child's feelings about adoption;
 - d. Meaning of adoption and how to resolve child's concerns;
 - e. Other issues of importance to child;
2. If child remains resistant to adoption, staffs case with adoption supervisor in order to assess adoption as a viable permanent plan and for the supervisor to provide guidance on how the child's resistance may be resolved;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Administrator/Supervisor

3. If adoption does not appear to be appropriate, schedules a staffing with the child's foster care worker and supervisor. Completes [DSS 30231, Child and Family Assessment Services Plan, Evaluation/Closure](#), documenting reason adoption is not an appropriate plan; and

Adoption Specialist

4. Updates CAPSS.

415.02 Life Book

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Gathers information, documents, photographs, etc. for the Life Book. Facilitates discussion with child regarding the information obtained. Asks foster parents for permission before using their complete names or other identifying information:
 - a. Reasons the child entered foster care and date of entry;
 - b. List of all out-of-home placements, including photographs and names of caregivers. Give a reason for every move and include names of schools, churches, and significant people in the child's life;
 - c. Photographs of the birth family;
 - d. Photographs of the child, beginning as young as possible;
 - e. Report cards, mementos, prize ribbons, etc.; and
2. Assists child in writing his/her life story, providing clarification, as needed, based on agency records.

416 Background Summary - Infant (Birth to 12 Months)

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist (Child's Worker)

1. Collects the following information for the infant's background summary and the case record. Medical records are obtained via consent from the birth parent (preferable) or from DSS as the legal guardian of the child.
 - a. Birth information, including all pertinent information related to the pregnancy and delivery. Include a description of any complications during pregnancy, drug use (specify type), or abortion attempts. Includes the DSS 1525, Birth Report;
 - b. Background information, including physical descriptions, interests, talents, and health information of birth parents and extended family members. Include the DSS 1575, Family History Sheet. Diseases; handicaps; and any other medical, psychological or medical conditions occurring in the birth family are explored and described. Causes and ages of death of immediate family members are also included;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- c. Developmental information, including the infant's personality, appearance, adjustment to foster care, and developmental progress. Information is obtained from the birth family, foster parents and caseworkers' observations. Includes the DSS 1576, Child Developmental History;
 - d. Medical information including any medical records since birth (hospitalizations, developmental assessments, pediatric office visits, immunizations, etc. Medical records may be obtained via consent from a parent (preferable) or a legal custodian of child. Child is required to have a medical examination before placement, which is recorded on the DSS 1526, Infant's Medical Record;
 - e. Birth verification - birth certificate must be requested;
 - f. Current legal status;
 - g. Photographs of child and birth parents, siblings of child;
2. Initiates Life Book for child, as appropriate to child's age, relationship to birth family and stay in foster care;
 3. Prepares non-identifying background summary for adoptive family, including full disclosure of child's special needs and background of birth family; and
 4. If child will be in foster care longer than six (6) months, schedules Foster Care Review Board hearing by sending a memo to the Foster Care Review Board informing them of the child's date of entry into foster care.

416.01 Background Summary - Child Older than 12 Months

Revision Number: 04-10, Effective Date: 12/28/2004

Adoption Specialist (Child's Worker)

1. Collects the following information. Medical records are obtained from health care providers by consent of the birth parent (preferable) or of DSS, if the child is in the Department's custody:
 - a. Birth information on the pregnancy and delivery
 - b. Birth family information, including physical descriptions, education, health/medical/psychological/psychiatric needs, talents, special interests, substance abuse issues, and other significant information;
 - c. Developmental information, including child's early experiences with attachment and separation, and the relationship of parent(s) to child
 - d. Medical needs/special needs;
 - e. Out-of-home placements, including placements with relatives, institutions, foster homes. Names and locations are included;
 - f. Sibling relationships;
 - g. Attachments to former foster parents and need for continuing relationships, if any;
 - h. Special services needed;
 - i. Current functioning, including school placement;
 - j. Circumstances of why and how the child entered foster care;
 - k. Reason for adoption;
 - l. Legal status;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

417 Selection of Families for Placement of Infants (Birth - 12 Months)

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist (Child's Worker)

1. Reviews any preferences the birth parent has concerning the openness of the adoption or whether the birth parent wants to review non-identifying abstracts on the families being considered for placement;
2. Submits a request for printout of available families who will accept the child's characteristics;
3. Requests the State Office adoptive home files and selects five or six appropriate families, using the following criteria:
 - a. Birth parent's preferences, if applicable;
 - b. Child's special needs;
 - c. Adoptive parent's preferences and acceptance of birth family and child factors;
 - d. Physical and emotional health of adoptive parent in terms of ability to care for the child until the child reaches adulthood, including evaluation of adoptive parent's ability to meet the changing needs of a child as the child ages;
 - e. Application date if all other factors are equal;
4. Convenes a placement committee composed of the Adoption Specialist(s) who have worked with the child and birth parent, the Adoption Supervisor or Administrator, and one to two additional adoption staff. If the child had a county Foster Care worker, that worker and Foster Care supervisor must also be invited to participate. The placement committee will not meet until the adoptive home files have been received from State Office;
5. Presents to the placement committee complete information on the child, including birth family background, child's health and developmental status, reason for child coming into care, etc. Presents information on the potential adoptive families and birth parent preferences, if applicable;
6. Selects up to four appropriate families, ranking them in order of preference. Neither the families' nor the child's race or ethnicity may be considered in selecting or ranking families. The only exception is when the child's comprehensive assessment has determined that race is a placement factor for that child. It is expected that such determinations will be rare and must be thoroughly documented and justified in the child's record. Placement may not be delayed or denied based solely on the location of the adoptive family; out of state families should receive the same consideration as South Carolina families. The committee should honor the birth parent's preferences, if possible;
7. Completes the DSS 30140, Case Referral/Transfer/Staffing, and files it in the child's record. Be specific as to the reasons the adoptive family was selected;
8. Shares the potential adoptive families' non-identifying abstracts with the birth parent, not disclosing the placement committee's ranking. If the birth parent has a choice, this choice will be honored if the family is available. Explains to the birth parent that his/her choice will be honored if possible, but the agency will

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

have to consider any unforeseen circumstances that may arise and that the final placement decision is the agency's. If the birth parent declines to make a choice or if his/her selection is not available, placement can proceed with the placement committee's choice(s) without convening another placement committee;

9. If the birth parent's preference was not honored, documents the reasons in the child's and birth parent's records. Documents in the State Office adoptive home record for each family that was not selected that the placement committee considered this family and the specific reasons for selecting another family; "more appropriate family selected" is not an adequate explanation. Documents in the selected family's and the child's case records the specific reasons why this family was selected; and
10. Notifies the birth parent which adoptive family received placement of her/his child by sharing non-identifying information and explains why the family was selected, if this family was not the birth parent's choice.

417.01 Selection of Families for Placement of Children Older than 12 Months

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist (Child's Worker)

1. Submits a request for printout of available families who will accept the child's characteristics;
2. Reviews the printout, requests the State Office adoptive home files and selects up to six appropriate families, using the following criteria:
 - a. Birth parent's preferences, if applicable;
 - b. Child's special needs;
 - c. Adoptive parent's preferences and acceptance of birth family and child factors;
 - d. Physical and emotional health of adoptive parent in terms of ability to care for the child until the child reaches adulthood, including evaluation of adoptive parent's ability to meet the changing needs of a child as the child ages;
 - e. Parenting experiences;
 - f. Application date if all other factors are equal;
3. Convenes a placement committee composed of the Adoption Specialist(s) who have worked with the child and birth parent, the Adoption Supervisor or Administrator, and one to two additional adoption staff. If the child had a county Foster Care worker, that worker and Foster Care supervisor must also be invited to participate. The placement committee will not meet until the adoptive home files have been received from State Office;
4. Presents to the placement committee complete information on the child, including birth family background, child's health and developmental status, reason for child coming into care, etc. Presents information on the potential adoptive families and the birth parent's preferences, if applicable;

Placement Committee

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

5. Selects up to four appropriate families, ranking them in order of preference. Neither the families' nor the child's race or ethnicity may be considered in selecting or ranking families. The only exception is when the child's comprehensive assessment has determined that race is a placement factor for that child. It is expected that such determinations will be rare and must be thoroughly documented and justified in the child's record. Placement may not be delayed or denied based solely on the location of the adoptive family; out of state families should receive the same consideration as South Carolina families.;

Adoption Specialist (Child's Worker)

6. Completes the DSS 30140, Case Referral/Transfer/Staffing, and files it in the child's record. Be specific as to the reasons the adoptive family was selected; and
7. Documents in the State Office adoptive home record for each family that was not selected that the placement committee considered this family and the specific reasons for selecting another family; **"more appropriate family selected" is not an adequate explanation**. Documents in the selected family's and the child's case records the specific reasons why this family was selected.

418 Placement Process - Separation of Siblings
Revision Number: 03-03, Effective Date: 11/18/2003

Every effort should be made to place siblings together in foster care. Before considering separation of siblings, the agency will make diligent efforts to place siblings together in the same adoptive home, if this is not contrary to the best interests of the children. If separation is unavoidable, the reasons must be documented in the children's case records.

Adoption Specialist

1. Reviews *Separation of Siblings - Issues to Consider*. Determines that one or more of the following conditions exist:
 - a. Psychological/psychiatric assessments indicate that the children need to be in separate adoptive homes;
 - b. A minimum of six months of child specific recruitment efforts have failed to identify an appropriate adoptive resource;
2. Documents in the case record and in the child's background summary the specific reasons why the siblings should be separated for adoption;

Adoption Administrator/Supervisor

3. Reviews the written documentation and approves or disapproves separation of the siblings. Signs the case record documentation entry if approval is granted; and

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

4. Makes every effort to ensure that contact between separated siblings is maintained while they are residing in separate foster and/or adoptive homes, if ongoing contact is not contrary to the children's best interest. If contact will not be maintained, documents the specific reasons why in the case record.

**418.01 Placement Process - Children of American Indian Ancestry (Indian Child Welfare Act)
(ICWA)**

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Determines if ICWA applies. ICWA covers foster care (both voluntary and involuntary), termination of parental rights, pre-adoptive and adoptive placements of children who are enrolled members of a recognized Indian tribe or eligible to be enrolled. ICWA defines an Indian child as "...any unmarried person who is under age eighteen and is either (a) a member of an Indian tribe or (b) is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe." The tribe must be a federally recognized tribe. Confirms with the foster care worker that the tribe has been notified, which should have been done as soon as enrollment/eligibility for enrollment was suggested. However, if it has not been done, notifies tribe. For help in obtaining contact information for a particular tribe, go to <http://www.angelfire.com/pa/COTRAIC> or <http://www.statelocalgov.net> (select Tribal Governments), or contact (as of October 2002) general Bureau of Indian Affairs information, 202-208-3710, Tribal Leaders Directory, 202-208-3711;
2. If the child falls within the ICWA, the placement must be made in accordance with ICWA (if the tribe assumes jurisdiction over the child, DSS will probably not be responsible for placement and/or selection of an adoptive home). Any court action, especially termination of parental rights and/or relinquishments, must be done in accordance with ICWA's statutory provisions; and
3. If tribe declines jurisdiction, places the child for adoption in accordance with the Indian Child Welfare Act.

418.02 Placement Process for Infants (Birth - 12 Months)

Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist (Child's Worker)

1. Contacts the selected adoptive family's Adoption Supervisor or the Adoption Administrator with the following:
 - a. Basic information on the child and the child's background;
 - b. Medical history;
 - c. Legal status;
 - d. Suggested placement/presentation date;

Adoption Specialist (Family's Worker)

2. Contacts the family and shares the information in # 1;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

3. Obtains new SLED/CPS/Sexual Offender Registry checks for selected adoptive family if the reports are older than six (6) months prior to anticipated adoptive placement;

Child's Adoption Specialist Adoption Supervisor Family's Adoption Specialist (Supervising Placement)

4. Presents the formal background summary and supporting documentation (medical/birth records, etc.), discusses this with the family, and answers any questions. Adoptive family and adoption staff agree upon how long the family will have to decide if they can meet the needs of this child. If the family expresses any doubts or reservations, suggests that the family discuss their concerns with family members, their doctor, or other person they trust before proceeding;

Adoption Specialist (Child's Worker) Adoption Supervisor

5. Informs family of any financial assistance for which the infant is eligible. Determines if family will be requesting an adoption subsidy and, if so, negotiates the amount with the family;

Adoption Specialist (Child's Worker)

6. Obtains approval for requested adoption subsidy prior to proceeding with placement, by having the Adoption Subsidy Negotiation Checklist signed by the Deputy State Director for County Operations or his designee;

Child's Adoption Specialist Adoption Supervisor Family's Adoption Specialist (Supervising Placement)

7. If family decides to proceed with placement, explains the DSS 3025, Agreement to Place Child in Adoptive Home, or the DSS 30113, Agreement to Place Child in Pre-Adoptive Home. Explains the purpose and process of the supervisory period;

Adoption Specialist (Child's Worker)

8. Obtains family's signature(s) on the appropriate placement agreement; the DSS 3025 A, Adoption Subsidy Agreement, if applicable; and the DSS 30122, Adoptive Parent(s) Certification Statement;

Adoption Administrator

9. Signs the appropriate placement agreement after the family signs; Adoption Specialist (Child's Worker)
10. Facilitates introduction of child to family; encourages foster parent(s) to discuss child's needs with adoptive parent(s); assesses interaction of child/family, comfort level of child/family, and readiness of adoptive family to take child home;

Adoption Specialist (Child's Worker)

11. Forwards the DSS 3025 A, Adoption Subsidy Agreement, to the Deputy State Director for County Operations or his designee for signature, who signs and forwards to the Special Needs Administrator in State Office;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Administrator (or Designee)

12. Completes Blue Sheet;
13. Forwards a copy of the signed placement agreement to State Office, along with Blue Sheet;

Adoption Specialist (Child's Worker)

14. Completes DSS 30155, Assessment Analysis/Placement Summary and DSS 30144, Service Agreement Family. Discusses and obtains signatures of adoptive parent(s) on service agreement or, if appropriate, forwards to supervising worker to discuss and obtain signatures;
15. If child is placed with an adoptive family who resides in a county not served by the adoption office from which the child is placed, sends child's record, financial assistance record, State Office record for the adoptive family, and all signed agreements to the adoption office providing post-placement supervision. Notifies Foster Care Review Board of change in venue;
16. Updates case plan, using DSS 30231, Child and Family Assessment Services Plan, and;
17. Updates CAPSS, including adding child to placement and adoption subsidy screens; and
18. Notifies county Medicaid worker regarding eligibility status change. Sends copy of Adoption Subsidy Agreement to Medicaid worker; and

Special Needs Administrator

19. Authorizes and initiates adoption subsidy payment in CAPSS.

418.03 Placement Process for Children Age One to Three Years
Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist (Child's Worker)

1. Contacts the selected adoptive family's Adoption Supervisor or the Adoption Administrator with the following:
 - a. Basic information on the child and the child's background;
 - b. Medical history;
 - c. Legal status;
 - d. Suggested presentation/placement date, including tentative visiting schedule;

Adoption Specialist (Family's Worker)

2. Contacts the family and shares the information in # 1;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

3. Obtains new SLED/CPS/ Sexual Offender Registry reports for selected adoptive family if reports are older than six (6) months prior to anticipated adoptive placement;

Child's Adoption Specialist and Supervisor Family's Adoption Specialist (Supervising Worker)

4. Presents the formal background summary and supporting documents (birth and medical records, developmental assessments, etc.), discusses this with the family, and answers any questions. Adoptive family and adoption staff agree upon how long the family will have to decide if this is a child whose needs they can meet. If the family expresses any doubts or reservations, suggests that the family discuss their concerns with family members, their doctor, or other person they trust before proceeding;
5. Informs family of any financial assistance for which the child is eligible. Determines if family will be requesting an adoption subsidy and, if so, negotiates the amount with the family;
6. Obtains approval for requested adoption subsidy prior to proceeding with placement, by having the Adoption Subsidy Negotiation Checklist signed by the Deputy Director for County Operations or his designee;

Adoption Specialist (Child's Worker)

7. If the family decides to proceed with adoptive placement, meets family and takes them to the foster home to meet the child and the foster family. May take child and adoptive family for a brief outing;
8. Has second visit at the foster home. This should be a daylong visit, with adoptive family spending time alone with child, as well as visiting in the foster home. Observes the adoptive family's interactions with the child and the child's reactions;
9. After each visit, discusses with adoptive family their feelings about the child and the visits. Explores any doubts the family may have;
10. If family and agency decide to proceed with placement, explains the DSS 3025, Agreement to Place Child in Adoptive Home, or the DSS 30113, Agreement to Place Child in Pre-Adoptive Home. Explains the purpose and process of the supervisory period;
11. Obtains family's signature(s) on the appropriate placement agreement, the, DSS 3025 A, Adoption Subsidy Agreement, if applicable, and the DSS 30122, Adoptive Parent(s) Certification Statement;
12. Accompanies the adoptive family to the foster home for a short visit. Child's belongings are packed, good-byes are said, and the family and child leave;
13. Offers supportive counseling to the foster family after the child and adoptive family have left;

Adoption Administrator

14. Signs the appropriate placement agreement after the family has signed;

Adoption Specialist (Child's Worker)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

15. Forwards the DSS 3025 A, Adoption Subsidy Agreement, to the Deputy State Director for County Operations or his designee for signature, who signs and forwards to the Special Needs Administrator in State Office;

Adoption Administrator (or Designee)

16. Completes Blue Sheet;
17. Forwards a copy of the signed placement agreement to State Office, along with Blue Sheet;

Adoption Specialist (Child's Worker)

18. Completes DSS 30155, Assessment Analysis/Placement Summary and DSS 30144, Service Agreement Family. Discusses and obtains signatures of adoptive parent(s) on service agreement or, if appropriate, forwards to supervising worker to discuss and obtain signatures;
19. If child is placed with an adoptive family who resides in a county not served by the adoption office from which the child is placed, sends child's record, financial assistance record, State Office record for the adoptive family, and all signed agreements to the adoption office providing post-placement supervision;
20. [Updates case plan, using DSS 30231, Child and Family Assessment Services Plan;](#)
21. Updates CAPSS, including adding child to placement and adoption subsidy screens;
22. Notifies county Medicaid worker regarding eligibility status change. Sends copy of Adoption Subsidy Agreement to Medicaid worker; and

Special Needs Administrator

23. Authorizes and initiates adoption subsidy payment in CAPSS.

418.04 Placement Process for Children Age Three Years and Older

Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist (Child's Worker)

1. Contacts the selected adoptive family's Adoption Supervisor or the Adoption Administrator with the following:
 - a. Basic information on the child and the child's background;
 - b. Medical history;
 - c. Legal status;
 - d. Suggested presentation/placement date, including tentative visiting schedule;

Adoption Specialist (Family's Worker)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. Contacts the family and shares the information in # 1;
3. Obtains new SLED/CPS/Sexual Offender Registry checks for selected adoptive family, if they are older than six (6) months prior to anticipated adoptive placement;

Child's Adoption Specialist/Supervisor Family's Adoption Specialist/Supervising Worker

4. Presents the formal background summary and supporting documents (birth and medical records, developmental assessments, etc.), discusses this with the family, and answers any questions. Adoptive family and adoption staff agree upon how long the family will have to decide if this is a child whose needs they can meet. If the family expresses any doubts or reservations, suggests that the family discuss their concerns with family members, their doctor, or other person they trust before proceeding;

Adoption Specialist (Child's Worker)

5. Informs family of any financial assistance for which the child is eligible. Determines if family will be requesting an adoption subsidy and, if so, negotiates the amount with the family;
6. Obtains approval for requested adoption subsidy prior to proceeding with placement, by having the Adoption Subsidy Negotiation Checklist signed by the Deputy State Director for County Operations or his designee;
7. If family and agency decide to proceed with placement, requests family to prepare scrapbook to be presented to child. Discusses visiting schedule;

Adoption Specialist (Child's Worker)

8. Meets adoptive family and takes them to the foster or group home. Family will have the opportunity to talk with the child's caregiver(s) or counselors to hear more about the child's needs and habits. Child will be able to share his/her life book with the family. Family may take the child out for part of the day, accompanied by the adoption specialist. Observes the family and child interaction;
9. Meets with family and child separately to discuss their feelings/impressions prior to holding second visit. Second visit may be an overnight visit to the adoptive family's home, if the child is comfortable with this;
10. Meets separately with the family and child to discuss the previous visits. Child has a minimum of two weekend or overnight visits to the adoptive home. During school vacation, child may have a week long visit with the family;
11. Meets separately with family and child to discuss how each is feeling about the placement. If agency and family agree to proceed with placement, schedules additional visits or sets a placement date;
12. If family and agency decide to proceed with placement explains the DSS 3025, Agreement to Place Child in Adoptive Home, or the DSS 30113, Agreement to Place Child in Pre-Adoptive Home. Explains the purpose and process of the supervisory period;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

13. Obtains adoptive parent(s) signature(s) on the appropriate placement agreement (see #10 above), the DSS 3025 A, Adoption Subsidy Agreement, if applicable, and the DSS 30122, Adoptive Parent(s) Certification Statement;
14. Accompanies the adoptive family to the foster home or group home. Child's belongings are packed, good-byes are said, and the family and child leave;
15. Offers supportive counseling to the foster family after the child and adoptive family have left;

Adoption Administrator

16. Signs the appropriate placement agreement after the family signs;

Adoption Administrator (or Designee)

17. Completes Blue Sheet;

Adoption Specialist (Child's Worker)

18. Forwards a copy of the signed placement agreement to State Office, along with Blue Sheet;
19. Forwards the Adoption Subsidy Agreement, DSS 3025 A to the Deputy State Director for County Operations or his designee for signature, who signs, returns the original to the area adoption office, and forwards a copy to the special Needs Administrator in State Office;
20. Completes DSS 30155, Assessment Analysis/Placement Summary and DSS 30144, Service Agreement Family. Discusses and obtains signatures of adoptive parent(s) on service agreement or, if appropriate, forwards to supervising worker to discuss and obtain signatures;
21. If child is placed with an adoptive family who resides in a county not served by the adoption office from which the child is placed, sends child's record, financial assistance record, State Office record for the adoptive family, and all signed agreements to the adoption office providing post-placement supervision;
22. [Updates case plan, using DSS 30231, Child and Family Assessment Services Plan;](#)
23. Updates CAPSS, including adding child to placement and adoption subsidy screens;

Special Needs Administrator

24. Notifies county Medicaid worker regarding eligibility status change. Sends copy of Adoption Subsidy Agreement to Medicaid worker; and
25. Authorizes and initiates adoption subsidy payment in CAPSS.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

This procedure provides birth parents and adoptive parents the right to choose varying degrees of openness in the adoption process.

Adoption Specialist

1. Counsels with birth parent(s) and/or adoptive parent(s) on openness in adoption;
2. Offers the birth parent(s) the options to:
 - a. Provide input into the selection of a family through the use of non-identifying abstracts;
 - b. Write non-identifying letters to the child and/or adoptive family through the agency;
 - c. Request that the child be placed in a family of a particular religious faith;
 - d. Send non-identifying gifts and pictures through the agency;
 - e. Request letters and pictures from the adoptive family through the agency;
 - f. Meet with the adoptive family, if all parties agree. Identifying information will not be exchanged.
 - g. Other requests not listed above;
3. Resolves conflicts between birth parents on placement preferences through casework counseling;
4. Assists the birth parent(s) and/or adoptive family to complete the DSS 30100 or DSS 30101, Openness in Adoption Checklist;
5. Explains to the birth parent(s) that their openness choices cannot be guaranteed; and
6. Explains to the birth parent(s) and the adoptive parent(s) that the validity of the final decree of adoption is not affected by an agreement entered into before the adoption between the adoptive parents and biological parents concerning visitation, exchange of information, or other interaction between the child and any other person. Such an agreement does not preserve any parental rights with the biological parents and does not give to them any rights enforceable in the South Carolina courts.

418.06 Placement Process - Ongoing Contact with Birth Family and/or Other Significant People
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Determines whether there are birth family members, such as siblings or other relatives, or other people significant to the child, with whom it would be in the child's best interest to maintain contact;
2. Counsels with the prospective adoptive family on the importance of maintaining this contact;
3. Stresses to the prospective adoptive family that:
 - a. There is a Reunion Register through which the adoptee and a birth parent and/or sibling may be reunited when the adoptee is at least 21 year of age;
 - b. A birth parent may petition the Family Court to open the adoption record;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- c. A birth parent or other family member may locate the adoptee through an independent search group or private investigator. In such a case, the agency cannot prevent contact and/or interference;
4. Prepares a written plan prior to implementing the ongoing contact and has all parties sign the plan, including the child if age appropriate;

Adoption Administrator

5. Reviews the written plan and signs it; and

Adoption Specialist

6. Counsels with the birth family member or other significant person on the legal meaning of adoption. Explains that the adoptive family is the child's legal family when the adoption is finalized. If the adoptive family decides to terminate ongoing contact between the child and birth family member or other significant person, they have the right to do so.

418.07 Placement Process - Canceling Proposed Placement After Visitation Has Begun

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist (Child's Worker)

1. Determines that child and family are inappropriately matched or family and/or child, if age appropriate, declines to proceed with placement;
2. Halts visitation immediately;
3. Contacts family's adoption specialist to discuss the problems in the planned placement;

Adoption Specialist (Child's Worker) and Adoption Supervisor

4. Meet with adoptive parent(s) to discuss the cancellation of the planned placement;

Adoption Specialist (Child's Worker)

5. Meets with the child and his/her caregiver(s) to discuss the cancellation of the planned placement. Explains to the child the reasons for the cancellation, in keeping with the child's ability to understand, and explores the child's feelings. Reassures the child that s/he is not to blame for the cancellation and that the adoption specialist will continue to search for a permanent family, if adoption is still the plan; and
6. Documents in the child's and family's records the reasons for the cancellation of the planned placement.

419 Post-Placement Services

Revision Number: 03-03, Effective Date: 11/18/2003

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Specialist (Supervising Placement)

1. Makes first home visit within one week of placement. Discusses the post-placement case plan, DSS 30144, Service Agreement Family, with the family and the child [if twelve (12) years old or older or if otherwise appropriate], and obtains signatures of adoptive parent(s) on the case plan if not previously signed with the child's worker;
2. Visits in the home a minimum of once per month to provide counseling and support to all family members. Conducts face-to-face interviews with the child, adoptive parent(s), and any other adults living in the home. Determines whether the child should be interviewed outside the presence of others in the home in order to assess the child's health and safety. If abuse or neglect is suspected, interviews and observes child outside the presence of others in the home;
3. If abuse or neglect is suspected, makes a report orally by telephone or otherwise to Out of Home Abuse and Neglect (OHAN) in State Office;
4. Documents monthly contact with the child and family according to TCM guidelines/requirements, including the following:
 - a. Child's overall physical and emotional adjustment since being placed, including any significant changes in the child's behavior, health, personality, etc.
 - b. Family's adjustment to the placement, including any significant changes in family relationships, stresses, and concerns regarding the child or the progress of the placement;
 - c. Adoption specialist's observations and recommendations;

Adoption Specialist (Supervising Placement)

5. Counsels with the family on their feelings about the child and the placement. Discusses problems that the family is experiencing or may expect to experience, based on the child's past behavior and/or special needs. Assists the family in resolving problems, either through counseling or referral and linkage to appropriate resources; and
6. Determines, along with the family, when it is time to finalize the adoption and proceeds with this recommendation. If an extension of post-placement is needed or if early finalization seems warranted, the adoption supervisor must concur. If the Department will not be consenting to an adoption by this family, informs family of that fact. If family has any further questions, instructs them to contact an attorney.

419.01 Post-Placement Services - Extension Beyond Twelve (12) Months
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist (Supervising Placement)

1. Recommends that family receive up to six additional months of post-placement services, based on family's and/or child's need for longer adjustment period. **Note:** If adoption complaint has been filed, court approval of the extension is necessary if adoption is not finalized within six (6) months after filing of complaint;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. Staffs case with adoption supervisor and/or adoption administrator and jointly decide whether the post-placement period should be extended for up to six months;
3. Meets with the adoptive parent(s) and child to discuss extending post-placement services. Updates the case plan with the participation of the family and child, if appropriate. Signs the case plan, along with the family and child, if child is twelve (12) years old or older;
4. At the end of the post-placement period extension, recommends whether family should proceed with adoption finalization;
5. Staffs case with adoption supervisor and/or adoption administrator and jointly decide whether family should proceed with finalization; and
6. Discusses recommendation with family and child, if appropriate.

420 Disruption

Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist (Supervising Placement)

1. Meets with the family and child to assess the situation. Provides counseling and offers to assist with obtaining supportive services to enable the family to remain intact;
2. Contacts the adoption specialist who placed the child to keep her/him informed of the situation;
3. Contacts other involved professionals for assistance, as appropriate;
4. Refers family and/or child for needed services and assists with locating available resources and linking family to them;
5. Arranges respite care, if necessary;
6. If disruption occurs, prepares the disruption statement and obtains the adoptive parent(s)' signature(s). Signs disruption statement, along with the adoption administrator/supervisor. Sends one copy to the child's worker (placing worker) and one copy to State Office;
7. Notifies Special Needs Administrator in State Office of the disruption by telephone or email, requesting that adoption subsidy be terminated;

State Office Special Needs Administrator

8. Updates CAPSS to terminate adoption subsidy; Adoption Specialist (Supervising Placement)
9. Provides counseling to the adoptive family to help them determine what went wrong with the placement and what type of child they could parent in the future;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Specialist (Family's Worker)

10. Places the family's adoptive home file in pending status for at least ninety (90) days. Returns the State Office adoptive home file to State Office and advises that the family is in pending status;

Adoption Specialist (Supervising Placement)

11. Prepares disruption summary for family's record. Sends a copy to the child's worker (placing worker) and places a copy in the State Office adoptive home file;

Adoption Specialist (Supervising Placement) coordinates with Placing Worker and Foster Care Worker, and/or MTS Worker, as appropriate

12. Arranges for foster care placement for child and facilitates the child's move;

Adoption Specialist (Child's Worker)

13. If foster care worker has case management or adoption no longer appears to be an appropriate permanent plan, arranges post-disruption staffing with the county foster care worker to discuss a permanent plan for the child within ten (10) days of the child re-entering foster care;
14. Counsels with the child on understanding the disruption and reassures the child that s/he is not responsible. Obtains psychological counseling for the child, if needed. If adoption remains the plan, begins preparing the child for another adoptive placement. Initiates recruitment, as appropriate;

15. Updates case plan, using DSS 30231, Child and Family Assessment Services Plan, and;

Adoption Specialist (Family's Worker)

16. Updates family's adoptive home assessment after the pending status has expired. Sends copy of update to State Office for the adoptive home file; and
17. Updates CAPSS.

420.01 Removal of Child from Adoptive Home - Adoptive Parents Do Not Agree to Removal
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist and Adoption Supervisor and Adoption Administrator

1. Confer and decide whether a situation exists that warrants removal of the child from the adoptive home. This may be either an abuse/neglect situation or a level of care issue;
2. If removal is warranted and the child has been placed for adoption, decides which of the following removal methods should be used:

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- a. Law enforcement may take emergency protective custody (Section 20-7-610 of the SC Code of Laws); or
- b. Family Court may issue an ex-parte order removing the child from the adoptive home prior to the actual removal. A court order is necessary even if the agency has custody of the child (see SC Code of Laws, Section 20-7-1738); and

Adoption Specialist

3. If law enforcement involvement is needed, calls the appropriate law enforcement agency and accompanies the assigned officer to the adoptive home; or
4. If a court order is needed, consults with the county DSS attorney and provides the information necessary to present to the court.

421 Finalization of the Adoption

Revision Number: 05-01, Effective Date: 11/03/2005

Adoption Specialist

1. At time adoption placement agreement is signed, informs adoptive family that their attorney must write to the area adoption office notifying the office of his/her representation in the adoption action, and that the complaint to adopt must be filed within 60 days of signing DSS 3025, Agreement to Place Child in Adoptive Home;

Adoption Office Administrative Assistant

2. Sends to the adoptive family a letter giving permission to finalize the adoption and instructions on how to proceed;

Adoption Specialist

3. Completes the post-placement report, signs, dates and writes certification number on the post-placement report;
4. Updates the pre-placement report if it is over a year old. Obtains new SLED/CPS checks and a new fire inspection, if over a year old;
5. Signs, dates and writes certification number on DSS 30120, Consent to Adoption by minor child, if the child is over fourteen (14) years of age, unless the court has found that:
 - a. The child does not have the mental capacity to consent, or
 - b. The best interests of the child are served by not requiring consent;

Adoption Administrator

6. Reviews, signs and writes certification number on the post-placement report;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Office Administrative Assistant

7. Prepares the Adoption Placement Certification and Judge's Eyes Only packet containing:
 - a. Pre-placement investigation, including update if over six (6) months old. The update must address any changes since the original assessment, including financial, family composition, health, etc;
 - b. Child's background summary, including addendum if over six (6) months old;
 - c. Post-placement report(s);
 - d. Statement of fees;
 - e. Original(s) of Relinquishment(s) and witness certifications;
 - f. Termination of parental rights order(s);
 - g. Affidavit(s) denying paternity;
 - h. Agency's consent to adopt;
8. Forwards the packet to the Office of General Counsel;

Office of General Counsel

9. Receives the Complaint for Adoption, prepares the Answer and sends the Answer to the adoptive family's attorney and to the Court for filing;
10. Seals the Judge's Eyes Only packet and mails to appropriate Clerk of Court for filing;

Adoption Specialist

11. Attends the adoption hearing and provides testimony as required;

Adoption Office Administrative Assistant

12. Receives the final decree and the Certificate of Adoption from the adoptive family's attorney. Completes Part I of the Certificate of Adoption and sends it to the Department of Health and Environmental Control (DHEC) for the amended birth certificate;
13. Processes reimbursement for nonrecurring costs upon receiving from the attorney an itemized statement and filed copy of the adoption decree;
14. Notifies the Office of General Counsel, Foster Care Review Board and the county DSS office of child's origin of the date of finalization;

Adoption Specialist/ Adoption Office Administrative Assistant

15. Updates DSS 3052, Adoption Subsidy Agreement, including nonrecurring expenses. Prepares state tax relief letter and mails to family, if appropriate. **Note:** Non-resident families are not eligible for the state tax relief;

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

16. Completes required paperwork for case closure, [including DSS 30231, Child and Family Assessment Services Plan, Evaluation/Closure](#), and closes case in CAPSS; and

Adoption Office Administrative Assistant

17. Prepares case for microfilming and mails case record to State Office.

422 Adoption Preservation Services

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Receives request for adoption preservation services from adoptive parent(s). Services are provided to adoptive families who have adopted through DSS or any other source;
2. Meets with the family to conduct a needs assessment, using the Post Legal Assessment Analysis. The needs assessment should include, but is not limited to:
 - a. Date of adoptive placement;
 - b. Agency which placed child for adoption;
 - c. A copy of the background summary on the child;
 - d. Description of the family's problems;
 - e. List of other agencies and/or professionals involved with the child/family;
 - f. List of services that family is requesting;
 - g. List of resources available to or needed by the family;
 - h. Worker's observations, assessment and recommendations;
3. Completes the Adoption Preservation Face Sheet;
4. Develops the Adoption Preservation Service Agreement with the family, within thirty (30) days of case assignment. Signs, along with family and child, if appropriate, the service plan;
5. Provides counseling to family. Assists family in locating and obtaining resources needed to keep family intact.
6. If out of home placement becomes necessary, facilitates staffing with Special Needs Committee (ISEDEC) and assists in locating an appropriate placement;
7. Contacts Managed Treatment Services (MTS) coordinator to develop contract with therapeutic facility;
8. Maintains contact with facility, child and family to assure child's needs are being met. Encourages family's involvement with development of treatment plan at facility. Assures family's involvement in family counseling with goal of child's return to family;

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

9. When services are no longer needed, prepares closing summary; and
10. Updates CAPSS.

423 Post-Legal Services to Adult Adoptees, Birth Families, and Adoptive Families - Non-identifying Information

Revision Number: 03-03, Effective Date: 11/18/2003

Intake Worker

1. Receives call concerning release of non-identifying information from adult adoptees, birth families and adoptive families. Informs client of adoption expense charged by the Department, if applicable;
2. Sends DSS 3056, Application for Post-Legal Services;

Post-Legal Administrative Assistant

3. Assigns case to a Post-Legal Administrator upon receipt of completed application; and
4. Contacts the client to schedule an interview or sends the non-identifying information.

423.01 Post-Legal Services to Adult Adoptees, Birth Families, and Adoptive Families - Reunion Register

Revision Number: 03-03, Effective Date: 11/18/2003

Intake Worker

1. Receives request for registration from adoptee who is at least twenty-one (21) years old, birth parent, or biological sibling. Informs client of expense charged by the Department and right to request, in writing, a waiver of the expense;

Post-Legal Administrative Assistant

2. Sends:
 - a. DSS 3056, Application for Post-Legal Services;
 - b. One of the following:
 - (1) DSS 30112, Adoption Reunion Register Adult Adoptee; or
 - (2) DSS 30110, Adoption Reunion Register Biological Parent; or
 - (3) DSS 30111, Adoption Reunion Register Biological Sibling;
3. Enters client on the computerized Reunion Register upon receipt of completed application and notarized affidavit;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

4. Processes fee received or, if a waiver was requested, sends to Post Legal Administrator for approval/disapproval;

Post-Legal Administrator

5. Reviews request for fee waiver and approves or disapproves;

Post-Legal Administrative Assistant

6. Forwards the case to a Post Legal Administrator when a match is made on the Reunion Register;

Post-Legal Administrator

7. Notifies the parties that a match has been made;
8. Counsels with the parties on the possible effects of disclosure prior to releasing identifying information;
9. After thirty (30) days from the time counseling is provided, discloses the identifying information. May request a waiver of the waiting period from the agency director, if circumstances warrant and if approved by the Adoption Supervisor;

Post-Legal Administrator

10. If DSS does not believe that disclosure is appropriate, applies for a court order to enjoin the disclosure. If applying for such a court order, may delay disclosure for twenty (20) days from the expiration of the thirty (30) day waiting period;
11. Provides post-reunion counseling services, if needed, and/or makes referrals to appropriate professionals

424 Application to Adopt

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Responds to all inquiries about adoption;
2. Gives basic information regarding agency adoption, including but not limited to, placement statistics, availability of children, study process, selection process, placement process, and finalization process. Explains to the potential applicant that placement of a child cannot be guaranteed, even after approval as an adoptive resource, and that the waiting time frame depends on the types of children needing placement and the availability of approved families;
3. If applicant is interested in becoming an adoptive parent or both adoptive and foster parent, provides:
 - a. DSS 1572, Application to Adopt
 - b. DSS 2612, Request for Criminal Background Check;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- c. DSS 30107, State Law Enforcement Division/Child Protective Services release;
 - d. DSS 3072, Consent to Release Information;
 - e. DSS 2419, *Adoption Guidelines and Steps to Adoption*;
 - f. DSS 2405, *Financial Assistance for Adopting Children with Special Needs*;
 - g. Fingerprint cards and instructions;
4. Receives application and signed releases. Checks CAPSS for Central Registry (CPS) investigation. Sends SLED release to DSS Office of Investigation Support Management. Processes fingerprint (FBI) review and checks Sexual Offender Registry;
 5. If applicant appears on Central Registry, contacts State Office Child Protective Services for more information. If SLED, FBI or Sexual Offender Registry report shows a record of applicant, consults with supervisor and/or attorney to determine whether the applicant can continue to be considered as a potential adoptive parent;
 6. Responds to applicant as to receipt of application and status; and
 7. Updates CAPSS.

424.01 Application to Adopt - DSS Employees

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Administrator/Supervisor (where employee resides)

1. Receives application request from employee;
2. Contacts the adoption administrator in adjoining adoption office to request that the adjoining office handle the employee's application, assessment, etc.;

Adoption Supervisor (where assessment was completed)

3. When the assessment has been completed, sends the record to the Adoption Administrator for the region where the family resides. Duplicates the record and forwards the copy to State Office; and

Adoption Specialist

4. Updates CAPSS.

424.02 Reapplication to Adopt

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Forwards DSS 1572, Application to Adopt, to the applicant family, including information on any applicable adoption expenses;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoptive Family

2. May reapply:
 - a. After finalization of a public or private adoption;
 - b. When a biological child is one year old;

Adoption Specialist

3. Requests prior adoption record from State Office, if family adopted through DSS;
4. May request the family to attend the group assessment training, if appropriate;
5. Requests that the applicant(s) complete the following forms and provide the following documents, as applicable and appropriate. Documents which are not time sensitive, such as birth certificates, Social Security cards, etc. may be used from the previous adoptive home file:
 - a. DSS 1574, Adult Physical Examination for Adoptive Applicants, for each adult living in the home;
 - b. DSS 30202, Medical Statement for Child, for all children living in the home, except foster children;
 - c. DSS 1573, Financial Information;
 - d. Most recent W-2, tax return, or last three (3) months' pay stubs;
 - e. Recent photographs of family and home, two (2) of each;
 - f. DSS 30107, State Law Enforcement Division/Child Protective Service release;
 - g. DSS 2612 Request for Criminal Background Check;
 - h. DSS 1575, Family History Information;
 - i. DSS 3008, Child Factors Checklist;
 - j. DSS 30101, Openness Checklist for Adoptive Parents;
 - k. Social Security card;
 - l. Driver's license;
 - m. Marriage license/certificate;
 - n. Divorce decree, including Complaint for Divorce, or death certificate if marriage was ended through death of a spouse;
 - o. Military discharge;
 - p. Birth certificate for each household member, excluding foster children;
 - q. Two letters of reference from persons who have known the applicant for the last three (3) years;
6. May conduct one joint office interview if appropriate;
7. Schedules at least one home visit with all family members present;
8. Requests fire inspection and sanitation reports on applicant(s)' home, if previous reports are more than one (1) year old;
9. Completes a Sexual Offender Registry check;
10. Completes the Reapplication Summary and submits to supervisor for review;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Administrator

11. Reviews and approves the assessment;

Adoption Specialist

12. Updates CAPSS;
13. Notifies family of approval. Provides written information on COAC;
14. Duplicates case and forwards to State Office;

Adoption Administrator

15. If family assessment is disapproved, writes letter to family, informing them of reasons for disapproval;
16. If family has applied to be both adoptive and foster family, consults with the county DSS attorney prior to sending denial letter to family. If family has applied only for adoption, consults with Office of General Counsel prior to sending denial letter to family;
17. Sends letter listing all the reasons for denial to family informing them of their right to appeal the decision. If family has applied to adopt a specified child, informs them that they may petition Family Court to adopt and seek judicial review of the refusal of DSS to consent to their proposed adoption; and

Adoption Specialist

18. Updates CAPPS.

424.03 Application to Adopt - Fingerprinting Reviews of Adoption Applicants

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Advises the applicant that fingerprinting reviews are required for all household members age 18 or older;
2. Provides fingerprint cards to the applicant(s) and to all household members 18 years of age or older;
3. Informs the applicant(s) to take the fingerprint cards to their local law enforcement office or other qualified resource and to have two sets of fingerprints obtained;
4. Receives the completed fingerprint cards from the applicant(s) and household members 18 years of age or older;
5. Submits the fingerprint cards to the Office of Investigation-Investigation Support Management (OI-ISM);

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Office of Investigation-Investigation Support Management (OI-ISM)

6. Receives and processes request for fingerprint review and sends the fingerprint cards to the South Carolina Law Enforcement Division (SLED), which forwards them to the Federal Bureau of Investigation (FBI);
7. Upon receipt of the fingerprint results, returns them to the adoption office that made the request;

Adoption Specialist

8. If the fingerprints were not readable, assists applicant to obtain additional prints.

Office of Investigation-Investigation Support Management (OI-ISM)

9. If fingerprints were not readable due to poor fingerprint quality, even though they are the best prints obtainable, and have been rejected by the FBI twice for this reason, requests the FBI to conduct a search by name on the applicant;
10. Sends results of name search to adoption office that made the request; and

Adoption Specialist

11. Documents results of fingerprint review or name search in CAPSS.

424.04 Application to Adopt - Fire Inspections

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Makes online request to appropriate fire authorities by:
 - a. Access State Fire Marshal at **<http://www.llr.state.sc.us>**, then click on State Fire Marshal tab on left side of screen;
 - b. Click on **Online Inspection Request Form**, the password is *America*;
 - c. Complete the form with the information required. There must be an entry in each field. Directions to the home must be clear and concise.
 - d. **Indicate** in the text of the directions if this is **an initial inspection** for a new adoptive home. For an initial inspection, enter the date the request is being made in the "license expiration" field;
 - e. Print a copy of the completed request and file in the adoptive home record. Make sure that the copy of the request is dated;
 - f. Click on **Submit Query** to complete the request;
2. Schedules fire inspection visit with family;
3. If no deficiencies are noted and/or a reinspection is not required, files report in record and proceeds with family assessment process;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

4. If deficiencies are noted and additional inspection is required, discusses corrections and time frames for completion with family and follow up from Fire Marshal;
5. When an approved adoptive family notifies agency of a change in residence, makes a new online request for a fire inspection; and
6. Updates CAPSS.

425 Adoptive Home Assessment - Approval

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Contacts family after receipt of favorable SLED, CPS and Sexual Offender Registry reports to invite them to group assessment sessions;
2. Upon receipt of completed application, sends four (4) requests for references, DSS 1571, Reference Letter for Adoptive Applicant to people provided by the applicant(s). References must have known the applicant(s) at least three (3) years and must not be relatives of the applicant(s). Makes personal contact with at least two of the references;
3. Ensures that fingerprint reports are received prior to approval of assessment;
4. Begins assessment process through the group study (group process is waived only in rare situations and only with adoption administrator's approval);
5. Requires that the applicant(s) complete the following forms and provide the following documents, as applicable and appropriate:
 - a. DSS 1574, Adult Physical Examination for each adult living in the home;
 - b. DSS 30102, Health Status Report, for all children living in the home, except foster children;
 - c. DSS 1573, Financial Information;
 - d. Most recent W-2, tax return, or last three (3) months pay stubs;
 - e. Recent photographs of family and home, two (2) of each;
 - f. DSS 30107, State Law Enforcement Division/Child Protective Service release;
 - g. DSS 2612, Request for Criminal Background Check;
 - h. DSS 1575, Family History Information;
 - i. DSS 3008, Child Factors Checklist;
 - j. DSS 30101, Openness Checklist for Adoptive Parents;
 - k. Social Security card;
 - l. Driver's license;
 - m. Marriage license/certificate;
 - n. Divorce decree, including Complaint for Divorce, or death certificate if marriage was ended through death of a spouse;
 - o. Military discharge;
 - p. Birth certificate for each household member, excluding foster children;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- q. Three references;
- 6. Makes a minimum of two (2) home visits. If there is more than one applicant, interviews the applicants separately and together and interviews any children living in the home. Has telephone contact with adult children living out of the home. Assesses applicant(s)' ability to parent, capability of coping with special needs, and motivation to adopt;
- 7. Requests fire inspection report on applicant(s)' home;
- 8. Requests health inspection report in writing from the local health department/DHEC;
- 9. Compiles materials and writes adoptive home assessment using the Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation;
- 10. Submits completed home assessment to supervisor for review;

Adoption Supervisor

- 11. Reviews adoptive home assessment. If more information is needed, asks the adoption specialist to discuss additional issues with the family, as needed. Submits the completed home assessment to adoption administrator for approval;

Adoption Administrator

- 12. Reviews adoptive home assessment, asks for additional information/clarification, if needed. Approves home assessment, if appropriate;

Adoption Specialist

- 13. If the family has also applied to be a foster family, licenses the family in accordance with agency procedures (see Chapter 9, Family Preservation and Child Welfare Services Manual). Sends a copy of case material to the county DSS licensing supervisor, for maintenance in the county office;
- 14. Duplicates case and forwards the copy to State Office;
- 15. Provides written notification to family of approval and placement in state files for consideration for adoptive placement. Provides family with information on COAC (Council on Adoptable Children); and
- 16. Updates CAPSS.

425.01 Adoptive Home Assessment - Denial

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Administrator

- 1. Denies approval of application, based on specific denial criteria;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. If family has applied to be both adoptive and foster family, consults with the county DSS attorney prior to sending denial letter to family. If family has applied only for adoption, consults with the Office of General Counsel prior to sending denial letter to family;
3. Sends to applicant(s) denial letter listing all reasons for denial, which contains notification of the right to appeal the decision. If family has applied to adopt a specific child, informs them that they may petition Family Court to adopt and seek judicial review of the refusal of DSS to consent to their proposed adoption; and

Adoption Specialist

4. Updates CAPSS.

425.02 Approved Adoptive Home Record - Updates
Revision Number: 04-03, Effective Date: 07/23/2004

Adoption Specialist

1. Contacts family to schedule interviews every six (6) months;
2. Reviews family's current situation:
 - a. Changes in family composition;
 - b. Preferences in types of children, including a review of DSS 3008, Child Factors Checklist;
 - c. Acceptance of legal risk and openness;
 - d. Change in address and/or household composition;
 - e. **Is any member of the household a paramour of the adoptive parent? "Paramour" refers to a person with whom the adoptive parent has a sexual relationship and who is not the adoptive parent's spouse.**
 - f. School changes;
 - g. Health;
 - h. Employment;
 - i. Financial circumstances, including current income;
 - j. Other changes in family circumstances;
 - k. Status of latest fire and health inspections;
 - l. Status of and date(s) of last criminal history record check, Central Registry check, and fingerprint (FBI) review on all household members age eighteen (18) years and older, Sex Offender Registry check on all household members regardless of age;
3. Prepares update summary and submits to adoption supervisor;

Adoption Supervisor

4. Reviews update summary, signs, and forwards a copy to State Office for the adoptive home record; and

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

5. Updates CAPSS if necessary.

425.03 Approved Adoptive Home Record - Pending Status

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Reviews the approved adoptive home record to determine whether it should be placed in pending status, using the following criteria:
 - a. Serious emotional or physical illness of one of the adults or their children;
 - b. Pregnancy.
 - c. Loss of a child;
 - d. Separation or divorce of spouses;
 - e. Change in family composition;
 - f. Other circumstances which warrant a temporary suspension in considering applicant(s) for adoptive placement;
2. Determines with the applicant(s) the length of time the adoptive home record should remain in pending status, but not to exceed six (6) months without the adoption administrator's concurrence;
3. Submits a brief summary on the reasons for pending status to the adoption supervisor;

Adoption Supervisor

4. Reviews summary, signs, and forwards a copy to State Office for the adoptive home record;

Adoption Specialist

5. Updates CAPSS; and
6. Reviews the reasons for pending status in six (6) months or less.

425.04 Approved Adoptive Home Record - Closure

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Decides to close an approved, waiting adoptive home file due to one of the following circumstances:
 - a. Family requests that case be closed;
 - b. Family fails to respond to agency phone calls and/or letters, and contact is lost with the family;
 - c. The family is no longer suitable for adoptive placement;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. If the adoptive home assessment is being transferred to an attorney or child placing agency for possible adoptive placement, requests the family to pay a fee of \$25;
3. Upon receipt of the fee and written request and release of information from the client, sends the adoptive home assessment to the attorney or agency;
4. Notifies State Office of the closure, so that the State Office adoptive home files can be updated; and.
5. Updates CAPSS

425.05 Adoptive Home Assessment - Providing Copy to Adoptive Parent

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Upon written request from adoptive parent, provides a copy of the completed adoptive home assessment. This may be an approved adoptive home assessment or a denial. No fee is charged.

426 Foster Parent Adoption

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Within sixty (60) days of child's referral for adoption services, discusses the following issues with the foster family:
 - a. The differences in foster care and adoption in terms of agency involvement, financial support, legal meaning of adoption, etc.;
 - b. The need to achieve permanence through adoption as expeditiously as possible;
 - c. The adoptive home assessment process;
 - d. The need for positive involvement from the foster family if the decision is made to move the child to another home; and
 - e. Any other issue that is specific to the child and foster family;

NOTE: THE FOLLOWING PROCEDURES APPLY TO ASSESSMENT OF FOSTER FAMILIES WHO WERE NOT ASSESSED UNDER THE FOSTER/ADOPTIVE FAMILY ASSESSMENT/PRE-PLACEMENT INVESTIGATION PROCESS INITIATED IN OCTOBER 2003.

2. Requests that the applicant(s) complete the following forms and provide the following documents. Documents which are not time sensitive, such as birth certificates, Social Security cards, etc. may be used from the foster home file. Medicals and financial information that is less than one (1) year old may be used if the foster parent adoptive applicant indicates there have been no changes:
 - a. DSS 1574, Adult Physical Examination for Adoptive Applicants, for each adult living in the home;
 - b. DSS 30102, Health Status Report, for all children living in the home, except foster children;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- c. DSS 1573, Financial Information;
 - d. Most recent W-2, tax return, or last three (3) months pay stubs;
 - e. Recent photographs of family and home, two (2) of each;
 - f. DSS 30107, State Law Enforcement Division/Child Protective Service release;
 - g. DSS 2612, Request for Criminal Background Check;
 - h. DSS 1575, Family History Information;
 - i. DSS 3008, Child Factors Checklist;
 - j. DSS 30101, Openness Checklist for Adoptive Parents;
 - k. Social Security card;
 - l. Drivers license;
 - m. Marriage license/certificate;
 - n. Divorce decree, including Complaint for Divorce, or death certificate if marriage was ended through death of a spouse;
 - o. Military discharge;
 - p. Birth certificate for each household member, excluding foster children;
 - q. Four (4) letters of reference from persons who have known the applicant(s) for the last three years; and
- 3. Reviews the foster family's licensing home study and most recent reevaluation;
 - 4. Completes adoptive home assessment, according to guidelines for all adoptive families, using the Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation;
 - 5. Submits completed home assessment to adoption supervisor;

Adoption Supervisor

- 6. Reviews adoptive home assessment and approves, if appropriate. If approved, proceeds according to "Family Assessment - Approval";
- 7. If denied, proceeds according to "Family Assessment - Denial";

Adoption Administrator

- 8. If denied, notifies the county director of the decision not to approve the foster family for adoption; and

Adoption Specialist

- 9. Updates CAPSS.

427 Foster Care Review Board - Child has Plan of Adoption and Foster Care has Case Call Management

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

1. Receives notice of Foster Care Review Board. Prepares a written report outlining the progress toward plan of adoption, including face to face contacts and specific recruitment efforts, if applicable. Attends Foster Care Review Board and presents written report or forwards report to foster care worker with a copy to the Foster Care Review Board Coordinator.

427.01 Foster Care Review Board - Child has Plan of Adoption and Adoption has Case Management

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Three weeks prior to Foster Care Review Board meeting, sends DSS 3098, Notice of Meeting of the Foster Care Review Board to:
 - a. Birth parent(s), if child is not free for adoption. **Note:** Contacts the Foster Care Review Board Coordinator to ensure that birth parent(s) and adoptive parent(s) are not invited at the same time. If necessary, requests that there be two separate review hearings so that birth and adoptive parent(s) do not meet;
 - b. Foster parent(s), if applicable;
 - c. Adoptive parent(s), if applicable;
 - d. Child ten (10) years of age and older, unless not in the best interest of the child;
 - e. Guardian-ad-litem, if appointed for a current court action;
 - f. Mental Health Counselor, if applicable;
 - g. Other involved parties or professionals who may have information regarding the child's permanent plan;
2. Advises the foster or adoptive parent(s) to complete and submit the DSS 3035, Adoptive Child Progress Report/Foster Child Progress Report, three (3) days prior to the scheduled review, if they are unable to attend the meeting. The report must be submitted to the Office of the Governor, Division of Foster Care Review;
3. Mails Foster Care Review Board packet to Foster Care Review Board coordinator within two (2) weeks of the scheduled review, including:
 - a. Letters of invitation;
 - b. Service Agreement/Case Evaluation;
 - c. Court orders;
 - d. Psychological evaluation received since last review;
 - e. DSS Form 1597 (A), Initial Foster Case Review Summary, or 1597 (B), Foster Care Review Summary Update ;
 - f. Reports from service providers;
 - g. Copy of permanency planning packet;
 - h. Filed permanency planning complaint, if applicable;
4. Attends and presents case information to Foster Care Review Board;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Specialist

5. Notifies Foster Care Review Board of a child placed into agency custody directly through the Adoption program. This notice must be made no later than four (4) months after the child is voluntarily placed or relinquished, so that the review can be scheduled within six (6) months of the date of entry into foster care. If adoption has not been finalized prior to six (6) months of the child's entry, the case must be reviewed.; and
6. Updates CAPSS.
7. Reviews the Foster Care Review Board recommendation and sends a letter of nonconcurrence, if the worker and supervisor disagree with the board's recommendation on the permanent plan;

Adoption Administrator

8. Responds to the Foster Care Review Board's Areas of Concern;

Adoption Specialist

9. Notifies the Foster Care Review Board when the child's adoption has been finalized; and
10. Updates CAPSS.

428 Judicial Review - Child in Foster Care with Plan of Adoption - Foster Care has Case Management

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Forwards a written summary to the foster care worker upon request; and
2. Participates in the permanency planning hearing at the request of the foster care worker and/or the county DSS attorney.

428.01 Judicial Review - Adoption has Case Management

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Arranges for permanency planning /judicial review hearing annually, or more frequently if required by court order;
2. Completes permanency planning packet and submits to supervisor for review two (2) months prior to the date hearing is due, following the format required by the county attorney;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Supervisor

3. Reviews permanency planning packet and forwards to the county attorney.

Adoption Specialist

4. Attends hearing and presents information as requested by the court;
5. Obtains copy of permanency planning order; and
6. Updates CAPSS.

429 Medical Consent

Revision Number: 03-03, Effective Date: 11/18/2003

Whenever a child is placed in DSS custody, either by court order or voluntary placement, DSS has the authority to make decisions concerning ordinary medical care and emergency care. Whenever a child needs a medical procedure other than ordinary routine medical care, a review of the court order should be made to determine if DSS has been granted the authority to consent to such care. Even if such authority has been granted, priority should always be given to allowing parents to consent to any procedure if they are available to do so (**unless parental rights have been relinquished or terminated**).

Health care providers do not need consent to provide emergency care to a patient. When the delay involved in obtaining the consent of the appropriate DSS official or parent would present a serious risk to the health of the patient, emergency care should be provided.

Authority to make decisions concerning major surgery or other high risk procedures remains with the parents (parental rights not relinquished or terminated) **unless** a court order gives DSS that authority. If a child is medically fragile or the Department is aware that the parents of the child cannot be located, the Department should obtain the court's authority to consent to major medical procedures as soon as possible to prevent any delays in obtaining medical care for the child.

DSS has authority to make all medical decisions for the child when **parental rights have been terminated or the parents have relinquished parental rights**. For other cases, DSS must be granted authority per court order to make medical decisions; however, the agency will not exert that court ordered authority on non-TPR cases if the parents are available and are willing to give their consents.

When DSS has authority to make medical decisions for a child, that authority is allocated as follows:

1. The **State Director or his/her designee** must make a decision for the following types of procedures:
 - a. **Major surgery**: includes, but is not limited to, any surgical procedure that requires two (2) or more days of in-patient hospitalization;
 - b. **Withholding or withdrawal** of life-sustaining procedures: includes order not to resuscitate (DNR)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. **County Directors/MTS Regional Directors/Area Adoption Administrators** must make the decision for other procedures, as follows:
 - a. **Minor surgery:** includes, but is not limited to, insertion of ear tubes, circumcision, and insertion of shunts and related tubing. Generally, any outpatient surgical procedure will fall into this category;
 - b. **Invasive diagnostic procedures:** includes, but is not limited to, upper GI, colonoscopy, barium enema;
 - c. Use of **general anesthesia**.
3. A **designee** (DSS employee) of the County Director, MTS Regional Director or Area Adoption Administrator may make the decision for other minor medical procedures. Examples include, but are not limited to:
 - a. **Noninvasive diagnostic procedures**, such as x-ray;
 - b. Procedures involving only a **negligible bodily invasion**, such as injection or withdrawal of blood;
 - c. **Maintenance** of shunts or tubes.
4. Staffings as needed regarding consent for medical procedures may include but not be limited to: County Director, MTS Director or MTS Regional Director, Area Adoption Administrator and/or designee; Guardian Ad Litem; parent(s), foster parent(s); supervisor and worker. Following the staffing, the county attorney (as necessary) may be consulted to resolve any legal questions or concerns.

429.01 Medical Consent - Parental Rights Have Not Been Terminated Or Relinquished and Agency Does Not Have Court Authority To Consent to Major Medical/Surgical Treatment

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Coordinates routine medical care as needed, and involves parents/guardian/caregivers, as appropriate;
2. In an emergency, attempts to notify the parent that the child needs emergency medical care;

Adoption Administrator or Designee

3. Gives consent for emergency medical care in the absence of parental consent. Treatment should not be delayed if the approval process presents a serious risk to the child's health;

Adoption Specialist

4. Reviews relevant court orders as necessary. Informs the parent(s)/guardian of the need for the medical procedure, assists the parent(s)/guardian in completing the consent paperwork,; and

NOTE: IF THE URGENCY OF THE CHILD'S MEDICAL CONDITION DOES NOT ALLOW FOR LOCATING THE PARENT(S)/GUARDIAN, EITHER THE ATTENDING PHYSICIAN OR DESIGNATED DSS OFFICIAL MAY AUTHORIZE EMERGENCY TREATMENT.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

5. If the parent/guardian is not available, their whereabouts are unknown, or they refuse to consent, coordinates and conducts a staffing to determine if there is a need to petition a court for authority to consent to the requested procedure:
 - a. Includes in the staffing the County Director, Adoption Administrator or designee, guardian ad litem, supervisor, foster/adoptive parents and agency worker as appropriate;
 - b. Submits an emergency petition to the Family Court;
 - c. Follows up as needed to expeditiously obtain a revised court order;
 - d. Documents efforts to contact/involve the parent(s)/guardian.

429.02 Medical Consent - Parental Rights Have Been Terminated or Relinquished or Agency Has Court Authority to Consent to Major Medical/Surgical Treatment

Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Administrator or Designee

1. Reviews the court order(s), as necessary;
2. Consents to medical care involving non-invasive diagnostic procedures such as x-ray; procedures involving only a negligible bodily invasion, such as injection or withdrawal of blood; maintenance on shunts or tubes;

Adoption Administrator

3. Consents to medical procedures involving minor surgery (i.e., insertion of ear tubes, shunts and related tubing), circumcision, outpatient surgical procedures, invasive diagnostic procedures (i.e., upper GI, colonoscopy, barium enema), use of general anesthesia for above procedures;

State Director

4. Consents to medical care for major surgery requiring two or more days of in-patient hospitalization or the withholding or withdrawal of life-sustaining procedures. This includes orders not to resuscitate (DNR orders);

Adoption Specialist

5. For procedures requiring the County Director's or Adoption Administrator's approval, prepares a summary for review, including the following information:
 - a. A court order granting the agency the authority to consent to the treatment, a court order that terminates parental rights, or executed relinquishment;
 - b. Name and telephone number of the doctor;
 - c. Nature of the proposed medical procedure (in plain English), whether it will be performed on an inpatient or outpatient basis, whether anesthesia is general or localized;
 - d. Significant risks presented by the procedure;
 - e. Why the doctor believes the procedure is needed and the anticipated results of the procedure;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- f. If the child has been in foster care four (4) months or longer, whether the foster parents feel the procedure should be performed and, if not, why; and
 - g. Physician/hospital consent forms, if applicable;
 - h. Cover sheet, "Requesting Medical Consent from the County Director, MTS Director, MTS Regional Director or Adoptions Administrator;"
6. In order to facilitate the State Director's approval:
- a. Makes the request as soon as possible and well in advance of the date of the procedure;
 - b. Contacts by phone a representative at the State Office (Division of Human Services) to give advance notice that faxed documents are being sent for State Director's approval;
 - c. Faxes request for approval, along with the information compiled, to the Assistant Director of Foster Care and Adoption;

State Office Staff

7. Prepares a packet that includes:
- a. Copy of the court order that gives DSS the authority to consent for medical treatment, c court order that terminates parental rights, or executed relinquishment(s);
 - b. Medical documentation of the child's condition;
 - c. Physician's/hospital's required forms;
 - d. Detailed summary of the case, including a history of parental involvement;
 - e. Cover sheet, "Requesting Medical Consent from the State Director"; and

Adoption Specialist

8. Ensures that the medical provider receives the consent documentation in a timely manner, or notifies provider if consent is not given. Files all documentation in the case record.

NOTE: EVEN THOUGH THE AGENCY MAY HAVE BEEN GRANTED AUTHORITY TO APPROVE THE PROCEDURE OR PARENTAL RIGHTS HAVE BEEN TERMINATED OR RELINQUISHED, THE AGENCY SHOULD CONSIDER ON A CASE BY CASE BASIS, FROM A HUMANITARIAN PERSPECTIVE RATHER THAN A LEGAL ONE, WHAT MEASURES SHOULD BE TAKEN TO INVOLVE OR INFORM THE PARENTS OF THE DECISION TO WITHHOLD OR WITHDRAW LIFE-SUSTAINING PROCEDURES OR APPROVAL OF A DNR ORDER.

429.03 Medical Consent - Medically Fragile Children
Revision Number: 03-03, Effective Date: 11/18/2003

When a medically fragile child initially enters the agency's custody, consideration should be given to obtaining legal authority to consent to all medical treatments at the earliest court hearing. The agency continues to support and encourage parental involvement when consent is needed for a medical procedure. However, when a child needs repeated medical treatments and the parent/guardian is not available or is not willing to consent to recommended medical treatments, the agency should obtain court authority to consent to major medical procedures to prevent delays in obtaining medical care for the child.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Specialist

1. Confers with the parent/guardian and determines their willingness to cooperate and consent to recommended medical treatment;
2. If necessary, staffs the case to determine if court intervention is needed for major surgery or high risk procedures; and
3. Follows agency approval procedures when a child needs medical treatment.

429.04 Medical Consent - Voluntary Placement

Revision Number: 03-03, Effective Date: 11/18/2003

For children placed through voluntary placement, the agency has the authority to consent to emergency and routine medical care. When the parent/guardian's whereabouts are unknown, the agency should obtain the court's authority in order to be able to consent to major medical procedures.

Adoption Specialist

1. Coordinates routine medical care as needed, and involves parents/guardian/caregivers, as appropriate;
2. In an emergency, attempts to notify the parent that the child needs emergency medical care;

Adoption Administrator or Designee

3. Gives consent for emergency medical care. Treatment should not be delayed if the approval process presents a serious risk to the child's health;

Adoption Specialist

4. Reviews relevant court orders as necessary. Informs the parent(s)/guardian of the need for the medical procedure, assists the parent(s)/guardian in completing the consent paperwork; and
5. If the parent/guardian is not available, their whereabouts are unknown, or they refuse to consent, coordinates and conducts a staffing to determine if court intervention is needed for removal of custody with authorization to consent or for court authorization to consent pursuant to S.C. Code 20-7-652:
 - a. Includes in the staffing the County Director, Adoption Administrator or designee, guardian ad litem, supervisor, foster/adoptive parents and agency worker as appropriate;
 - b. Submits an emergency petition to the Family Court;
 - c. Follows up as needed to expeditiously obtain a revised court order;
 - d. Documents efforts to contact/involve the parent(s)/guardian.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

430 Interstate Compact on Adoption - South Carolina: The Receiving State
Revision Number: 03-03, Effective Date: 11/18/2003

State Office ICPC

1. Receives request for an adoptive home assessment and transfers request to the adoption office which serves the family's county of residence;

Adoption Supervisor

2. Assigns case and establishes time frame for completion;

Adoption Specialist

3. Contacts the family to discuss the assessment process. Obtains completed adoption application and permission for SLED/CPS checks and keeps in record;
4. Processes SLED/CPS checks;
5. Completes adoptive home assessment using DSS 30142, Family Assessment Summary/Pre-Placement Investigation;
6. If child was placed in the home prior to the adoptive home assessment being done, completes a quarterly report for the sending state and submits to State Office ICPC while working with the family to complete the adoptive home assessment;

Adoption Supervisor/Administrator

7. Reviews the adoptive home assessment and approves or disapproves it;

Adoption Specialist

8. Forwards an approved adoptive home assessment, in triplicate, to State Office to the ICPC Deputy for Adoption;
9. If the adoptive home assessment is not approved, consults with the Office of General Counsel on the basis for denial. Notifies, in writing, the ICPC Deputy for Adoption of the disapproval. Includes the specific reasons for the denial in this letter;
10. If the adoptive home assessment is approved and when the adoptive placement is made, provides post-placement services as required by the sending state;
11. Completes quarterly supervisory reports to sending state;

Adoption Supervisor

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

12. Reviews quarterly supervisory reports to sending state, signs and forwards, in triplicate, to the ICPC Deputy for Adoption;

Adoption Specialist

13. Recommends family proceed/not proceed with finalization of the adoption;

ICPC Deputy for Adoption

11. Sends a letter to the family's attorney stating that ICPC regulations have been fulfilled;

Adoption Specialist

12. If recommending that family proceed with adoption finalization, in coordination with sending state, provides information for court process as required by the state in which the adoption is being finalized;
13. If decision is made not to finalize, notifies sending state, discuss alternatives and determine if disruption is necessary. Facilitate return of child to sending state or implement agreed upon plan;
14. Sends the final decree to the ICPC Deputy for Adoption, then closes the case; and
15. Updates CAPSS.

430.01 Interstate Compact on Adoption - South Carolina: The Receiving State - Post-Placement Supervision Request Only, Family Assessment Completed by Licensed Private Agency

Revision Number: 03-03, Effective Date: 11/18/2003

State Office ICPC

1. Sends the completed family assessment and background information on the child to the adoption office which serves the family's county of residence;
2. Receives request for post-placement supervision and forwards request to the adoption office which serves the family's county of residence;

Adoption Administrator

3. Reviews the family assessment. Notifies State Office ICPC of approval of family assessment or, if concerns exist, contacts the private agency which completed the family assessment and asks that the concerns be addressed;
4. Notifies State Office ICPC if concerns exist and again when concerns have been addressed; and

State Office ICPC

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

5. Gives approval to receiving state via ICPC 100 A when notified by adoption administrator that family assessment has been approved or, if concerns have been identified, when they have been resolved.

430.02 Interstate Compact on Adoption - South Carolina: The Sending State
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist/Supervisor

1. Forwards, in triplicate, to the ICPC Deputy for Adoption:
 - a. Background summary on the child;
 - b. School reports;
 - c. Psychologicals, if appropriate;
 - d. Birth report on the child;
 - e. Clearance of Indian ancestry, if appropriate;
 - f. IV-E eligibility determination/eligibility for adoption subsidy;
 - g. Birth certificate;
 - h. Any special needs the child has;
 - i. Reason for the out-of-state placement;
 - j. Legal documents;
 - k. Court order awarding custody to the Department;
 - l. Copy of approved adoptive home study on selected family if it has been completed;
 - m. Completed ICPC - 100A;

Receiving State

2. Approves/disapproves the requested placement;

Adoption Specialist

3. If approved, prepares child for placement. Arranges for introduction of child and family, pre-placement visitation and placement;
4. Provides the post-placement reports, upon request;
5. Informs the adoption office of the state's requirements for legalization of the adoption. The adoptive family must have completed criminal record history and child protective service background checks, and the results must meet the requirements for approval as an adoptive home under South Carolina law;
6. Provides necessary documentation to finalize the adoption. Required documentation may vary, depending on where the adoption is finalized;
7. Requests copy of final adoption decree and amended birth certificate; and
8. Closes case after receiving final adoption decree;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

9. Updates CAPSS.

430.03 Interstate Compact on Adoption - Requesting Post Placement Services From Another State
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Forwards, in triplicate, a complete background summary on the child and a copy of the adoptive family's home assessment to the ICPC Deputy for Adoption;
2. Completes the ICPC - 100A in triplicate, and forwards to the ICPC Deputy for Adoption, noting the state in which the adoption will be legalized and the length of post-placement supervision requested. Requests that receiving state make monthly face to face contacts, as required by South Carolina law and document request in case record and on ICPC - 100A;

Adoption Administrator

3. Notifies the ICPC Deputy for Adoption of the date the child and family moved to the receiving state by completing and forwarding the ICPC - 100B to State Office;

ICPC Deputy for Adoption

4. Forwards to the Adoption Specialist/Supervisor the post-placement reports; and

Adoption Specialist

5. Closes the case after the final decree of adoption has been received; and
6. Updates CAPSS.

431 Court Ordered Adoptive Home Studies
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Supervisor

1. Assigns the case upon receipt of the certified court order or as requested by the DSS attorney;

Adoption Specialist

2. Makes appointment with family. Informs family of and collects the adoption expense charged by the Department;
3. Updates CAPSS;
4. Conducts the pre-placement investigation and prepares written report;

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Adoption Supervisor

5. Reviews pre-placement investigation reports and files reports with the court;
6. Notifies DSS attorney if the study cannot be completed as ordered. Attorney will then advise;
7. Provides post-placement supervision, as ordered by the court; and
8. Closes the case when the final decree of adoption is obtained. Updates CAPSS.

432 Adoption Expenses - Waiving or Reducing
Revision Number: 03-03, Effective Date: 11/18/2003

Adoption Specialist

1. Notifies applicant/adoptive family of the adoption expense for the service requested, if the child is a non-special needs child, and of their right to request a waiver or reduction of the expense charged by the Department;

Adoptive Family/Applicant

2. Requests, in writing, that adoption expense charged by the Department be waived or reduced due to specific circumstances;

Adoption Specialist

3. Prepares brief summary, specifying the hardship the family is experiencing;

Adoption Administrator/Supervisor

4. Reviews summary and forwards to Director of Adoptions or his designee;

Director of Adoptions or His Designee

5. Reviews summary and notifies adoption administrator of the decision regarding waiver or reduction of the adoption expense charged by the Department; and

Adoption Specialist

6. Informs applicant/adoptive family, in writing of the decision on the request for waiver or reduction of the expense charged by the Department and their right to appeal the decision.

433 Adoptive Placement Checklist
Revision Number: 03-03, Effective Date: 11/18/2003

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

AH Name: _____ CAPSS Provider ID: _____

Old AH Number (if Applicable): _____

Are provider's address and payee name correct in CAPSS? _____

Child's Name: _____ CAPSS Person ID: _____

_____ CAPSS Person ID: _____

_____ CAPSS Person ID: _____

Legal

Legal Status

/NA

_____ TPR Order
_____ 2 Relinquishments
_____ 1 Relinquishment
_____ Other (list)

Legal Documents

/NA

_____ Date entered Foster Care: _____
_____ EPC date: _____
_____ Exparte date: _____
_____ Voluntary Placement date: _____
_____ Removal Complaint date: _____
_____ Merits Order date: _____
_____ Subsequent Orders and Dates:

Birth Certificates

___ Child ___ Adoptive Mother ___ Adoptive Father

___ Background Summary (addendum if over 6 months old)
___ Preplacement Investigation (addendum if over six months old)
___ Statement of Fees
___ Date of last Judicial Review/Permanency Planning hearing _____
___ Fire inspection (current within one year of placement)
___ DHEC (health and safety) inspection
___ Fingerprint results
___ CPS results (current within six months prior to placement and within one year after placement prior to finalization)
___ SLED results (current within six months prior to placement and within one year after placement prior to finalization)

Financial Assistance (Adoption Assistance, Supplemental Benefits, Medical Subsidy)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

/NA

- ____ Face Sheet
- ____ Adoption Subsidy Negotiation Checklist
- ____ Supporting documentation to verify Special Needs (should be marked clearly in record for copying)
- ____ Copy of Social Security Card
- ____ Nonrecurring costs (pay attorney directly ____ or reimburse family ____)

Determination of Adoption Subsidy Eligibility (IV-E or Supplemental Benefits)

/NA

- ____ Adoption Subsidy Negotiation Checklist
- ____ Determination of IV-E Adoption Assistance Eligibility and attachments
 - ____ CIS
 - ____ Current statement from bookkeeper
 - ____ Payment printout from CAPSS
 - ____ Proof of SSI, if applicable
 - ____ DSS 3081, 30149, IV-E Checklist from CAPSS
- ____ 3050 A (if IV-E eligible – will be dated when adoption complaint filed)
- ____ 1903 noting change in status due to adoptive placement

CAPSS

/NA

- ____ Complete adoption subsidy eligibility checklist in CAPSS
- ____ Add placement with adoptive family and end foster care placement (Foster Care service line – placement tab) (ICPC – create provider and AH)
- ____ Complete adoption subsidy approval on same screen. Check no board pay for adoption subsidy.
- ____ Update Child Tracking (Adoption service line)
- ____ Close recruitment
- ____ If child receives SSI, SSA, VA benefits, check the person record in CAPSS to make sure the amount is accurate – make corrections if necessary)
- ____ Check the following for accuracy (Foster Care service line – Legal tab)
 - ____ TPR for each parent
 - ____ Permanency Planning – must be current
 - ____ Foster Care Review Board – must be current (If adoption has case management, make necessary corrections. If not, make correction when case management is transferred)
 - ____ Indicate placement and change of status for adoptive home, if family lives in your region. If not, ask adoption specialist in family's region to make this change.

Correspondence

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

/NA

- ____ Letter to Eddie
- ____ Medicaid worker (old and new county, if applicable)
- ____ FCRB Change of Venue? ____ yes/no
- ____ Foster care worker, if applicable
- ____ Letter to supervising worker/region
- ____ *Seedlings* form/notice of placement/change/hold
- ____ Closure of State Office recruitment/SEEUS
- ____ Expenses letter (if applicable)
- ____ Letter to State Office terminating accelerated board
- ____ Letter for family to take to attorney

Miscellaneous

/NA

- ____ Adoptive Parent Certification Statement
- ____ Child's Consent to Adopt (14 years or older)
- ____ Post Placement Report (when adoption complaint is filed)
- ____ Notification to adoption office licensing worker to close foster home (for foster/adopt placement)
- ____ Lifebook

Marital status of birth mother at time of child's birth ____ *(If birth mother was married at time of child's birth, her husband is the child's legal father, and his rights must be disposed of)*

Birth mother's year of birth ____

Birth father's year of birth ____

Adoptive placement the result of recruitment ____ yes/no If yes, source _____

434 Background Summary Outline

Revision Number: 03-03, Effective Date: 11/18/2003

Adoptive Family:

Child for Adoption:

- Name:
- Date of Birth:
- Race:

I. Physical

A. Physical Description (eyes, hair, complexion, height, weight, personality)

B. Physical Development

- Current functioning (Is child on target developmentally for age?)
- Fine and gross motor development

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- If developmentally delayed, in what areas and to what extent? (include developmental assessment). What is prognosis and recommended treatment?

C. Medical/Birth Records

Birth

- Prenatal alcohol, tobacco, drug exposure
- Birth weight, length, head/chest circumference
- APGAR scores
- Complications during pregnancy
- Type of delivery (normal? vaginal/cesarean delivery?)
- Complications during/after delivery
- Summary of hospital stay (include anything out of the ordinary, treatment and outcome)
- To who discharged? Date of discharge?

Other Medical (Do not list appointments)

- Summarize other medical records, hospitalizations
- Regular medical care since placement in foster care
- Vision (vision test, glasses, normal vision)
- Hearing (include results of testing, if any)
- Dental (Has child had regular dental care, orthodonture? Does child need dental work?)
- DHEC (EPSDT appointments)
- WIC records

II. Emotional

A. Attachment

- Child's attachment to caretaker, birth parent, grandparent, siblings
- Child's level of acceptance of/desire for the adoption plan
- What is child's understanding of the meaning of adoption?
- Child's loyalty to birth family (Has child dealt with this loss? How do you know?)
- Goodbye visit (Did one occur? If so, what happened during the visit? What did the birthparent(s) say? How did the child react after the visit?)
- If siblings are to be placed into separate homes, why?
- Describe sibling relationship and need for continued contact, or specify why none is needed.
- Describe visitation with birth family during foster care placement (frequency & quality), and date of last visit.
- Child's ability to recognize and express feelings (open expression, avoidance, or acting out?). Are feelings expressed appropriately when child is angry, sad, etc?
- How child responds to affection, ability to give and receive affection (words, hugs, and kisses)
- Child's feelings about and ability to relate to male/female caretakers
- Any issues that may affect child's ability to bond to both sexes
- Child's general attitude (positive, negative, etc.)
- Child's ability to recognize feelings of others

B. Self-Esteem

- Child's feelings about self (does child see him/herself as deserving?)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- How child handles change, including moves in foster care. Describe how child handled change in the past and how you expect child to handle adoptive placement.
- Child's ability to have fun
- Child's ability to describe things he/she has done successfully. Does child seem to get satisfaction from a job well done?
- Child's success in school. Is child generally successful?
- How do others (teachers, caretakers, foster parents) describe the child in terms of success?
- Is child interested in pursuing activities in which he/she can succeed?

C. Grief and Loss Issues

- Child's understanding of reasons for foster care placement and why he/she cannot return to birth family
- Child's acceptance of adoption as the plan
- Child's understanding/concept of family
- Child's level of acceptance/acknowledgement of the various stages of grief

III. Social

A. Peer Relationships

- How child relates to peers (include positive and negative aspects). Does child relate better to older or younger children than to peers?
- How child handles conflict with peers
- Child's relationship to other children in the home, how they interact
- Does child receive gratification from relationships with other children?
- Does child have a best friend or close friends? Is it easy for child to form friendships?
- Child's understanding of what it means to be a friend. Child's ability to reciprocate a friend's attention or emotional closeness
- Loyalty to friends
- Is child a follower or a leader? Is he/she easily influenced by peers negatively/positively?
- Child's ability to say no when he/she knows something is wrong and he/she should not be involved

B. Adult Relationships

- Child's relationships to parental figures
- Child's relationships to other adults (teachers, neighbors, friends of foster family, coaches, etc.)
- Child's trust level of adults
- Child's understanding of the parental role
- Child's concept of his/her role in the family

C. Affection

- Child's attitude to affection. Does child demand it or shy away? What type of affection does child prefer?
- Does the child easily give and receive affection?
- Does the affection have depth?

D. Responsibility

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- Degree of child's acceptance of chores and his/her responsibility for them. Does child perform without reminders, without complaint, without expecting anything in return? Does child see chores as part of his/her role in the family?
- Does child accept responsibility for his/her actions (right or wrong)?

E. Social

- Involvement in extra curricular activities, sports, clubs, church, etc.
- How important are these activities to child? How does child perform?
- Is child generally an introvert or extrovert?
- How does child handle stress?
- Child's understanding of sexual development/level of sexual education (if age appropriate)?
- Holidays/family traditions. Are there special ways of celebration that are important to the child, special stories, moments from the past that are significant to the child?

F. Control Issues

- Child's ability to control own behavior. Does he/she need external controls?
- Does child need to be in control in all situations?
- Child's awareness of consequences for actions?
- Is child's attention span appropriate? If not, describe problem.

IV. Cognitive Development

- IQ – full scale, verbal, performance
- Psychological testing, dates, diagnoses, recommendations
- Child's ability to think logically
- Can child think ahead?
- Child's ability to understand cause and effect, especially regarding own actions
- Child's understanding of sense of time
- Child's ability to think abstractly
- Is child able to apply what he/she has learned/experiences to new situations, especially so that he can repeat appropriate actions or avoid negative actions?

V. Moral Development

- Child's understanding of rules as a part of fairness
- Does child express guilt/remorse for breaking rules/laws? If yes, how is it expressed?
- Does child accept responsibility for misdeeds or blame others?
- Child's understanding of right and wrong

VI. Spiritual Development

- Child's previous church attendance, including frequency
- Child's religious affiliation/preference
- Importance of church attendance to child
- Child's specific beliefs that would affect his/her ability to integrate into a family (attitudes toward alcohol/tobacco use, etc.)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

VII. Discipline

- How does child respond to authority?
- What type of discipline does the child respond to?
- What type of discipline does not work with child? What type should be avoided?
- Does child escalate a reasonable request into a battle?
- Child's ability to control behaviors when he wants to do so?

VIII. Behaviors

- List the specific problem behaviors the child has had in the past as well as current behaviors.
- Which behaviors are survival behaviors and have persisted over a period of time? These will be hardest to change.
- Connect the child's behavior to his/her past, life experiences, moves in foster care, etc., as a means of explaining and helping the adoptive family understand the reasons for the behavior.
- Does the child think the problem behavior needs to change?
- What has been done to correct the problem behavior on the part of the child, caretaker, therapist, etc.?
- If the child has any of the following behaviors, address them in the background summary (not an inclusive list - add others as necessary)
 - Ø Bedtime problems: fear of the dark, nightmares, other fears
 - Ø Destruction of property (child's or others')
 - Ø Bedwetting, soiling (day or night)
 - Ø Lying
 - Ø Stealing
 - Ø Specific fears/phobias
 - Ø Sexual problems: sexual acting out, sexually active, public masturbation, abuse of others, provocative
 - Ø Fighting, physically aggressive with children or adults
 - Ø Fire setting
 - Ø Harmful to self, others, animals
 - Ø Hard/soft drug use, alcohol, tobacco use
 - Ø Eating disorder

IX. Academic Performance

- Grade level in school. Is child on target for chronological age?
- School testing: types of tests, results and recommendations
- Type of school placement: mainstream, LD, EMH, resource, etc.
- IEP dates, results and recommendations. Include current and past IEPs.
- Special school services needed other than those already mentioned
- Child's easy/difficult subjects in school
- Child's classroom behavior with peers, teachers. List any problem behaviors.
- Homework/school assignments: how much assistance and monitoring is required?

X. Therapeutic Interventions

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- Type of therapeutic services child receives or has received in the past: therapeutic foster home, psychological counseling, physical/occupational/speech therapies, etc.
- Reason for therapeutic services, date began, treatment recommendations, goals, progress toward goals, frequency of service, recommendations for continued treatment, prognosis for improvement
- Child's specific diagnoses, current and past
- Medication currently prescribed, dosage, frequency, and effectiveness. Include previous medication prescribed for specific diagnoses, with dates.

XI. Routine Functioning

- Personal hygiene, ability to manage with/without supervision
- Sleeping habits: night light, door open/closed, alone or share room
- Eating habits: food likes/dislikes, favorites, table manners, etc.
- Talents: music, art, drama, singing, crafts, etc.
- Other interests/hobbies/sports

XII. Foster Care History

- Previous DSS involvement with birth family prior to child entering foster care
- Previous CPS reports, results of the investigations, findings, CPS treatment records, services to the birth family while child remained in the home, efforts to prevent the removal of the child from the home
- Child's entry into foster care, date, reason, specific circumstances surrounding the removal from the home. Include initial entry and all re-entries into foster care.
- Efforts made by the birth parents (all parents) to work on the treatment plan for the return of the child
- Visitation between child, siblings, birth parents, and other relatives, if applicable, after placement into foster care. Include frequency and impact on the child.
- List in chronological order all foster care placements. Include dates, type of placement, reason child was moved, and child's reaction, if significant.
- Termination of Parental Rights/Relinquishment. Include date(s) and child's reaction to being told that TPR /relinquishment had been completed.
- Good-bye visit with birth parents/other significant people: describe the event, date, who attended, what birth parent said/did, how child responded, emotional impact on child, closure/lack of closure for child.

XIII. Family History

A. Maternal

Birth Mother

1. Physical description
2. Race
3. Educational level
4. Occupation
5. Health, including drug/alcohol/tobacco usage
6. Marital status, previous marriages
7. Relationship with the child's birth father, including how they met/became involved, whether they still have a relationship, history of domestic violence, if any
7. Personality traits and interests

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

8. Degree of interaction with child
9. Reason for releasing the child, if applicable
10. Birth mother's relationship with her parents, her childhood experiences, why she was not able to parent child. Was she ever in foster care?
11. Has birth mother always lived in SC, or has she lived in other states? If so, what were the circumstances surrounding the moves?

Maternal Grandmother

1. Physical description
2. Race
3. Educational level
4. Occupation
5. Health, including drug/alcohol/tobacco use
6. Marital status
7. Personality traits and interests

Maternal Grandfather

1. Physical description
2. Race
3. Educational level
4. Occupation
5. Health, including drug/alcohol/tobacco use
6. Marital status
7. Personality traits and interests

Maternal Aunts/Uncles

1. Physical description
2. Race
3. Educational level
4. Occupation
5. Health, including drug/alcohol/tobacco use
6. Marital status
7. Personality traits and interests

B. Paternal

Birth Father

- Physical description
- Race
- Educational level
- Occupation
- Health, including drug/alcohol/tobacco usage
- Marital status, previous marriages
- Personality traits and interests
- Knowledge of child and attitude toward child and birth mother
- Degree of interaction with child
- Reason for releasing the child, if applicable

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- Birth father's relationship with his parents, his childhood experiences, why he was not able to parent child. Was he ever in foster care?
- Has birth father always lived in SC, or has he lived in other states? If so, what were the circumstances surrounding the moves?

Paternal Grandmother, Grandfather, Aunts, Uncles
(Same information as for maternal relatives)

C. Siblings of Child (include if child has been adopted or is living with birth parents, extended relatives, etc., and include half/step siblings, as well as full birth siblings)

- Physical description
- Race
- Health, including drug/alcohol/tobacco usage
- Personality traits and interests
- Describe any specific emotional, behavioral, physical, mental, or medical problems of siblings.

XIV. Legal Status (include birth mother, named birth father(s), John Doe and legal father, as applicable)

435 Comprehensive Child Adoption Assessment
Revision Number: 03-03, Effective Date: 11/18/2003

Child's Name:

Case #:

Date of Birth:

I. Child's History

A. Date Entered Foster Care:

B. Reason Child Entered Foster Care:

C. Siblings in Placement: ____ Yes ____ No
Names and DOB:

D. Current Foster Care Placement Provider:

Type of Placement:

____ Therapeutic (Mentor, HSA, etc.) ____ ISCEDC ____ Regular Foster Home
____ Treatment Foster Care ____ Group Care ____ Hospitalization

Does this placement receive an accelerated board rate? ____ Yes ____ No

E. History of Placements

Name of Provider	Type of Provider	Date Placed	Date Removed	Reason
------------------	------------------	-------------	--------------	--------

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

II. Describe the child's identifiable problems/needs and how long they have existed (Attach supporting documentation).

A. Medical

Diagnosis	Yes/No	Treatment/Medications	Service Providers
Arthritis			
Blindness			
Cancer			
Cerebral Palsy			
Crippling Disorder			
Cystic Fibrosis			
Deafness			
Down Syndrome			
Fetal Alcohol Effect			
Fetal Alcohol Syndrome			
Heart Defects			
Kidney Disease			
Multiple Sclerosis			
Muscular Dystrophy			
Orthopedic Problems			
Paralysis			
Prenatal Substance Exposure			
Sickle Cell Anemia			
Other:			
Other:			
Other:			

B. Educational

School Attending:

Current Grade:

Contact Person:

Type of School Placement:

- ☐ Mainstream
- ☐ EMH
- ☐ EH
- ☐ LD
- ☐ Resource
- ☐ Other

C. Emotional/Psychological

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Diagnosis	Yes/ No	Treatment/Medications	Service Providers
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ADD			
ADHD			
Adjustment Disorders			
Antisocial Personality			
Autism			
Bipolar			
Conduct Disorder			
Delusional			
Depression			
Eating Disorder			
Gender Identity Disorder			
Learning Disorder			
Mental Retardation			
Obsessive/Compulsive Disorder			
Oppositional/Defiant Disorder			
Post Traumatic Stress Disorder			
Panic/Anxiety Disorder			
Prenatal Substance Exposure			
Cocaine			
Alcohol			
Marijuana			
Other:			
Reactive Attachment Disorder			
Schizophrenia			
Separation Anxiety Disorder			
Sleep Disorder			
Substance Abuse			

Other Areas of Concern:

Has a psychological evaluation been completed on child? ____ Yes ____ No

If yes, list evaluator, date of evaluation, and attach a copy:

D. Social/Behavioral

Diagnosis	Yes/ No	Treatment/Medications	Service Providers
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Accident Prone			
Cheating			
Clings to Adults			
Cruel to Animals			
Deliberately Harms Self			
Depression			
Destructive to Property/Others			
Enuresis			

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Encopresis
Fear of Animals or Places
Gets into Many Fights
Hoarding/Gorging Food
Hyperactive
Impulsive
Lying
Nightmares
Obscene Language
Runs Away
Sets Fires
Sexual Activity
 Masturbation
 Lewd Comments
 Inappropriate Touching of Others
 Abuses Other Children
Smoking
Speech/Problems
Stealing
Suicide Attempts
Suicidal Ideation
Temper Tantrums
Withdrawal
Other:
Other:

Has child had any criminal involvement? ____ Yes ____ No

If yes, list charges/convictions:

Probation/Parole Status:

Contact Person/Telephone Number:

E. Developmental

Diagnosis	Yes/ No	Treatment/Medications	Service Providers
Speech/Language Delay			
Gross Motor Delay			
Fine Motor Delay			
Social Delay			
Sensory Integration Disorder			
Other:			

III. Attachment Issues/Significant Relationships

A. Is child currently visiting with birth family? ____ Yes ____ No

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

If yes, specify person and relationship:

Frequency of visits:

Child's attitude toward birth parents:

Child's attitude toward siblings:

B. Attachment to Current Foster Care Provider

Is this a potential adoptive resource? ____ Yes ____ No ____ Unknown

C. Relative Placement

Was placement with any relative assessed? ____ Yes ____ No

If yes, list the name of the relative and the relationship to the child:

Were any home studies completed for relatives? ____ Yes ____ No

If yes, list the relative and the result of the home study:

D. Child's Attitude About Adoption

VI. Other Involved Parties/Agencies/Professionals

Name	Agency	Date of Contact	Phone Number
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VII. Dates of Contacts with Child

A. Face to Face:

B. Other:

VIII. Recommendation

Caseworker's Signature

Date

Supervisor's Signature

Date

Administrator's Signature

Date

436 Separation of Siblings - Issues to Consider

Revision Number: 03-03, Effective Date: 11/18/2003

- What are each child's special needs? What services are required to meet them? What are the extra demands on the child's caretaker?

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- Have the children lived together in foster care? If yes, how long? If not, why? What efforts were made to prevent separation? What efforts were made to reunite the children? What kind of visitation has been scheduled between the siblings to maintain the sibling bond?
- What have you observed to be the relationship between the children? How attached are they to each other? Do they talk about each other? If negative interactions are observed between the siblings, how do they differ from normal sibling rivalry? How has the role of each child in the birth family affected the relationships between the siblings?
- Have the children been in therapy? How long and how consistent has the therapy been? What are the issues addressed, the therapy goals and what progress has been made? Do the children see the same therapist? If not, what attempt has been made to get the therapists together with involved agency staff to discuss the needs of the children and the long-term effects of permanent separation? If the child's/children's problems could be stabilized, could the children be placed together?
- What is the level of success of the child's/children's current placements? If successful, what are the qualities/abilities of the current caretaker(s) that contribute to the success? If the children have been successfully placed together in the past, what were the qualities/abilities of the caretaker(s) that contributed to the success? With the right kind of family, could these children be placed together?
- If the children disrupted from a placement where they were placed together, was the disruption due to the children's needs/behaviors, or was the placement resource not an appropriate match to the children's needs?
- What is each child's ability to attach and to form new attachments?
- Does each child indicate a desire to be placed with siblings? If not, why? What are each child's age, maturity level and ability to understand his/her decision?
- Are families available who will take a sibling group? If not, how long will it take to locate an appropriate family?
- How receptive to adoption is each child?
- What is each child's attachment to and desire to remain in current placement, including each child's willingness to move from current provider and accept placement in another family?
- Has a sibling bond assessment been done?

437 Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation Outline
Revision Number: 04-03, Effective Date: 07/23/2004

SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES

FOSTER/ADOPTIVE FAMILY ASSESSMENT

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

SUMMARY/PRE-PLACEMENT INVESTIGATION

I. FAMILY COMPOSITION

Name	Relationship to Applicant	Date of Birth	Social Security Number	Driver's License Number	Employment/School
------	---------------------------	---------------	------------------------	-------------------------	-------------------

II. RESIDENTIAL ADDRESS: _____

MAILING ADDRESS: _____

DIRECTIONS:

PHONE NUMBERS: HOME _____ WORK _____, _____
CELL _____, _____ E-MAIL _____

III. DESCRIPTION OF PARENTS

MOTHER:

Race _____ Complexion _____ Height _____ Weight _____
Eye color _____ Hair color _____ Religion _____
Educational level _____

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

FATHER:

Race _____ Complexion _____ Height _____ Weight _____
Eye color _____ Hair color _____ Religion _____
Educational level _____

IV. CONTACTS DURING ASSESSMENT

Date of Contact	Type (TC/HV)	With Whom
-----------------	--------------	-----------

V. MOTIVATION TO FOSTER AND/OR ADOPT

VI. FAMILY HISTORY

A. Mother

B. Father

VIII. MARITAL HISTORY/RELATIONSHIP

IX. FAMILY RELATIONSHIPS / FUNCTIONING / COPING ABILITY

X. WORK AND EDUCATIONAL HISTORY

A. Mother

B. Father

XI. MEDICAL/MENTAL HEALTH HISTORY

XII. FINANCIAL

XIII. RELIGIOUS AFFILIATION

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

XIV. DISCIPLINE

XV. CHILD CARE ARRANGEMENTS

XVI. HOME AND COMMUNITY

XVII. OTHER HOUSEHOLD MEMBERS (Include whether any household member is a paramour of the adoptive parent.)

XVIII. TRAINING

XIX. REFERENCES

XX. LAW ENFORCEMENT (SLED) CHECKS/ FINGERPRINTING/ CENTRAL REGISTRY OF CHILD ABUSE AND NEGLECT CHECK/ SEX OFFENDER REGISTRY CHECK

XXI. WORKING WITH THE CHILD/AGENCY/BIOLOGICAL FAMILY

XXII. FAMILY PREFERENCE IN CHILD

XXIII. RECOMMENDATION

XXIV. SIGNATURES

Worker

Certificate # _____

Date: _____

Supervisor

Certificate # _____ or NA

Date: _____

437.01 Foster/Adoptive Family Assessment Summary/Pre-Placement Investigation Instructions

Revision Number: 04-03, Effective Date: 07/23/2004

I. Family Composition For purposes of licensing, interviewing and assessing, an individual who spends significant amounts of time in an applicant's household can be considered a household member. Include non-custodial children who visit and anyone who routinely spends evenings or weekends.

II. Address

Residential Address: Physical location of the home.

Mailing Address: (self explanatory)

Directions: (self explanatory)

Phone Numbers: (self explanatory)

III. Description of Parents (self explanatory)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

IV. Contacts During Assessment Minimum of 2 home visits (minimum of 1 family interview and 1 interview per individual). Document interviews with adult household members and children over age 6. May also interview adult children of applicant.

V. Motivation to Foster and/or Adopt

- A. Why has the family chosen to extend family through fostering and/or adopting?
- B. How long has the family been thinking about their decision?
- C. What made them decide to apply now?
- D. What does the family believe they have to offer a child? Do they want to "save" the child? Do they expect the child to be appreciative of their efforts? Do their own child need a playmate? Are they lonely or want someone to take care of them?
- E. What does the family believe will be the hardest and easiest thing which they will have to deal with as a foster and/or adoptive parent?
- F. What changes does the family believe they will be making in their family, household and schedule to accommodate a child?
- G. If there is a fertility problem, what are the family's feelings and resolution of the issues?
- H. Are both parents equally motivated to foster and/or adopt?
- I. Describe the extended family support, especially for single parents.
- J. If single parent, who will be the other sex role model?

VI. Family History: Answer separately for both mother and father (if applicable)

- A. When and where born?
- B. Describe their family composition. Birth order.
- C. Describe the relationship applicant's parents had with each other, with applicant, with other children in the home when growing up.
- D. If applicant's parents are still living, describe their current relationship with the applicant and with other siblings.
- E. Describe the current relationship between the applicant, siblings and other relatives.
- F. How many years were applicant's parents married? Had either of them had a previous marriage? Number?
- G. What responsibilities and chores did applicant have around the house as a child? Did he/she ever work part time? If yes, what was it?
- H. How were problems solved between parents and as a family?
- I. What happened when applicant's parents disagreed?
- J. How were applicants disciplined by their parents? How does applicant feel about this type of discipline?
- K. Education/work history of applicant's parents.
- L. Health history of applicant's parents and siblings. Indicate causes of death, if applicable.
- M. Did applicant's parents and siblings have any substance abuse/mental health issues?
- N. Was applicant or siblings the victim of any child abuse/neglect?

VII. Children/Parenting Experiences

- A. How many children were born to each applicant? Provide names and birth dates. Any health problems or special needs?

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- B. What is the current situation, accomplishments of adult children?
- C. What is current relationship with adult children? Are they supportive of the parent's decision to foster/adopt children? Any evidence of estranged relationships?
- D. How many children has the applicant adopted or fostered in the past? Do these children currently live with them? How did they incorporate each child into the home? Which types of children were most easily incorporated? Which were the most challenging?
- E. How did children change their marriage?
- F. Does the applicant have other experiences with children that relate to parenting?
- G. Were any biological children ever in foster care, adopted, or lived with relatives? If yes, describe circumstances in detail.
- H. If they have a child who is not an adult not living with them, where is he/she living? Describe the reasons he/she is living elsewhere (if not an adult). Do the applicant financially support the child? Does he/she visit? How often? In the applicant's home? Do the applicants visit the child? How often?
- I. For **each of the children** currently in the home:
 - 1. What are some of their accomplishments?
 - 2. What grade do they attend? Overall, how are they doing in school?
 - 3. What age did applicant find the most satisfying? The most difficult?
 - 4. How does applicant describe each child's personality?
 - 5. What special interests and/or talent does each child have?
 - 6. Describe each child's behavior. Are there concerns about child's behavior?
 - 7. What does each parent enjoy most about each child? Least?
 - 8. What are the applicant's expectations of each child?
 - 9. What is the applicant's involvement with each child's educational and recreational activities? Do the parents (one or both) attend school conferences, ball games, etc.?
 - 10. What is the child's attitude about another child coming into the home to live?
- J. How do the children relate to parents and interact with one another in their home? Does one dominate? Is there sibling rivalry? How do they argue? How are disputes settled?
- K. Does the family have any plans for increasing the size of their family through birth or adoption through another source including a private adoption agency? Are they licensed through a private agency?

VIII. Marital History/Relationship

- A. How would applicants describe their marital relationship? Any separations/trial separations? Any marital counseling? Any history of domestic violence?
- B. How many years have they been married? (Obtain copy of marriage license.)
- C. When and how did they meet? Length of courtship?
- D. Has either been married before? If so, when and for what reasons did the marriage end? (Obtain copies of divorce petitions and divorce decrees.) How is this marriage different from previous ones?
- E. If applicant is a single parent, has he/she previously experienced or is he/she currently involved in a long-term relationship with a "significant other"? If yes, describe the nature of the relationship and, if ended, the reasons for its end. What role would the "significant other" play in the home? (Determine if the "significant other" should be considered a household member.)

IX. Family Relationships/Functioning/Coping Ability

- A. How are decisions made within the family?

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- B. What is important to the parents as individuals and a couple?
- C. How do they resolve disagreements or problems in the home? What happens when they disagree?
- D. How are household responsibilities/duties assigned and/or divided?
- E. How do they deal with stress?
- F. What losses have parents experienced in their lifetime (e.g. loss due to the death of a parent, sibling, spouse, child, or other relative or due to divorce of parents or spouse)?
- G. Where does the family usually go on vacation? Do vacation plans include children? Will foster/adoptive children be included in these plans?
- H. Does the family have pets? If yes, what kind? Is the pet important to the whole family or to a particular member? What arrangements can be made if the pet presents a problem for the foster or adoptive child? Is pet routinely seen by a veterinarian? (Review DHEC inspection regarding rabies vaccinations.)
- I. What hobbies/activities does each family member enjoy doing? What kinds of hobbies/activities are they involved in at this time? To what social groups do family members belong? What activities do they enjoy as a family? How often do these groups meet or activities occur?
- J. What does each family member identify as his/her:
 - 1. Strengths
 - 2. Limitations
 - 3. Successes
 - 4. Failures

X. Work and Educational History (to be provided for each applicant)

- A. Are applicants currently employed outside the home? If yes, what is the current occupation? How long have they had the job? Does their employment ever take them out of town and/or require overnight trips? If so, how often? What are their working hours?
- B. What other occupation and/or employment have they had? Reasons for leaving each previous employment. Has applicant ever been fired? If so, why?
- C. What do they like most and least about working outside the home, or inside the home, if applicable?
- D. Have either ever served in the military? If yes, when? Were they honorably discharged? Date of discharge? (Obtain copy of discharge papers.)
- E. What educational experiences have they had --educational level obtained, GED, attended technical school or college, or other employment training? If college graduate, what was their major? Include names of schools and colleges and courses of study. Any future educational plans?

XI. Medical/Mental Health History (to be provided by/on each applicant and household member)

- A. Has applicant or household member ever had any serious illness?
- B. Has applicant or another household member ever been hospitalized? If yes, when, for what?
- C. Has applicant or another member of the household ever been treated for any emotional, mental health or addiction problems? If yes, by whom? When? Where? For what problems? Is applicant or other household member currently receiving treatment for the problem? Is medication prescribed? Review criminal records checks for any DUI offenses as a possible indicator of substance abuse. Worker will instruct applicant to complete the necessary authorization forms from their various medical/mental health providers to authorize those providers to disclose the protected health information to DSS in order to evaluate the applicant's fitness and suitability.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- D. Information received from therapist or physician regarding the applicant's ability to become a resource parent or regarding the impact of any other household member's presence in the home.
- E. Give dates and results of medicals on all household members. (Medical reports on file in case record.)

XII. Financial

- A. What is the family's monthly gross income? What is the "take-home" pay? (verification required)
Financial forms will need to be completed.
- B. Is family receiving TANF or Food Stamps?
- C. What are the monthly expenses?
- D. Do they pay child support for any children not living with them? How much? Is it current? If not, how much arrearage?
- E. Who is responsible for budgeting and managing the family's money?
- F. Does the family have savings and other assets?
- G. Can the family provide for the child without being dependent on board payments or subsidies? What financial assistance do they expect to receive for a child?
- H. Has any family member ever been convicted of writing bad checks? Has any property ever been repossessed? Ever filed for bankruptcy?
- I. Will family's medical insurance cover an adopted child? What are the family's plans to include the child in their will? Who will care for child in case of parent's death? Has this been discussed with this individual? What was their reaction? Include information obtained after contacting this person.

XIII. Religious Affiliation

- A. What role does religion play in the family's life?
- B. What church does the family attend? What is the religious denomination? Does the entire family attend?
- C. In what church related activities do they participate? How often?
- D. If a child is placed with the family and either child or birth parent requests that the child attend a different religious denomination, how would the family handle it?
- E. If an older child preferred not to attend church, how would the family handle it?

XIV. Discipline

- A. What forms of discipline do they use? If corporal punishment is used, are they willing to terminate the use of corporal punishment, and knowledgeable of and receptive to the use of other methods of discipline?
- B. Do applicants fully understand the agency's policy prohibiting the use of corporal punishment?
- C. Do parents agree on how to discipline? If no, how are these issues settled?
- D. Do the parents exhibit the ability to understand/recognize disruptive behaviors placed children may display and appropriately respond to that behavior? (How would you handle ---?)
- E. Do discipline practices reflect realistic expectations, flexibility, and tolerance?
- F. How would applicants discipline a foster or an adopted child?

XV. Child Care Arrangements: include informal or unlicensed persons if they are providing care on a routine basis (Central Registry and Sexual Offender checks required).

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- A. Child care provider used: type, name, address, and telephone number.
- B. Frequency/reason used.
- C. Results of interviews with any and all child care providers and full time babysitters. Results of Central Registry and Sexual Offender checks on any non-licensed providers.
- D. Babysitters (non-routine) used: name, address, in babysitter's home or applicant's home, frequency, reason.

XVI. Home and Community

- A. Physical description of the house, yard, neighborhood and surrounding area. Describe the number of rooms in the house.
- B. Does the family own or rent their home?
- C. How long have they lived at their current address? How many times has the family moved? Reasons for the moves.
- D. Is home a subsidized housing unit? If so, will an increase in family size create a problem?
- E. Is residence in a high crime area? (Verified by law enforcement.)
- F. Describe the sleeping arrangements and storage space for the children. Describe the sleeping arrangements for the other household members. Would small children be within calling distance of the parents? Are sleeping arrangement consistent with standards of care?
- G. Is there a swimming pool? Is it secured? What is the plan for supervision?
- H. Are firearms locked in a storage container? If applicant has firearms and ammunition, where are they stored and secured?
- I. What schools would a child attend?
- J. What recreational facilities are in or near the neighborhood?
- K. Accessibility of other community resources, e.g. medical, special school placements.
- L. How would the children be transported to and from school and other activities/appointments? Is transportation consistent with public safety laws, e.g. car seats?
- M. Would the family be able to transport the child to the school he/she attended before removal?
- N. Give dates and results of both DHEC inspection (including lead inspection) and fire inspection. Document correction of any cited deficiencies or recommendations.

XVII. Other Household Members

- A. Other than applicant, and applicant's children, is there anyone else living in the household or who stays overnight in the home on a repeated basis? If yes, provide name, age, and occupation. [Is any member of the household a paramour of the adoptive parent?](#)
- B. How long have they lived in applicant's house? Is this a temporary or permanent arrangement? If temporary, how long will they be in the household?
- C. What were the circumstances leading to their residing with the family?
- D. Describe how they participate with applicant's family. Do they contribute to the household income?
- E. What household responsibilities does he/she assume in the home? Amount of time spent in the home.
- F. What has been the individual's involvement with children?
- G. What does the individual think about the applicant's fostering and/or adopting?
- H. What changes does the individual anticipate that the addition of another child will make in the family?
- I. Will the individual be involved in child care? How?
- J. Education/Work history
- K. Medical history, current medical status.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- L. Any previous mental health or addiction history?
- M. Results of background checks (SLED, SO, CR. Fingerprinting).

XVIII. Training (information should be obtained from the trainers)

- A. Have applicants received the required number of training hours? Did the Applicant(s) participate ingroup or individual training?
- B. How did the applicant(s) participate in training?
- C. Did they demonstrate a basic understanding of the foster care and adoption programs and its goals?
- D. Did applicants exhibit in training the ability to be self analytical and make changes in their behavior and lifestyle to meet the needs of the child?
- E. Was training received by any other parent figure (e.g. grandmother) who will be parenting the foster child?

XIX. References (three non-relatives who have known applicants for last 3 years)

What were references opinions of the applicant's ability to foster and/or adopt children? Are they aware of any personal problems the family may be experiencing?

XX. Law Enforcement (SLED) Check/ Fingerprinting/Central Registry of Child Abuse and Neglect Check/Sex Offender Registry Check (on all household members age18 and older)

- A. What were the dates/results of each inquiry for each required household member?
- B. If a report reflected convictions that do not automatically bar placement under 20-7-1642, describe and give details regarding the charges, outcomes, treatments lifestyle changes, etc. along with the resulting recommendation administrative authority regarding licensure/approval.
- C. Adoptive home denials need to be discussed with the Office of General Counsel. Foster home denials need to be discussed with the County Attorney.

XXI. Working With the Child/Agency/Biological Family

- A. What problems do they think they will have in keeping information about a child confidential? (Must inform applicant of agency's policy regarding confidentiality and indicate in assessment that this was done.)
- B. Do they think they will have any difficulty not pressing the child for information about his/her past?
- C. How do they think they will react to information voluntarily provided to them by the child about his/her past life, e.g. if the information is bizarre, graphic, violent, sexually explicit? (Must inform applicant of the need to share such information with child's worker and indicate in assessment that this was done.)
- D. How do they think they will be able to handle:
 - 1. Contact between the child and the agency's worker, including required visits in the home, and unannounced visits (if appropriate)?
 - 2. Contact between the child and any other professional who may be working with a child, including the GAL?
 - 3. Sharing the child with his/her biological siblings and other family members (when appropriate)?
- E. How do they feel about:
 - 1. Meeting with the biological parents to obtain/share information regarding the child (if appropriate)?

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

2. Jointly attending medical appointments, educational conferences, etc. with the biological parents (if appropriate)?
3. Actively participating (if appropriate) in meetings/staffings that include agency staff, biological parents, community members, and other support systems for the purpose of providing input regarding the needs of the child/family?
4. Attending or at a minimum providing a written report for Foster Care Review Board?
- F. Does the applicant understand that a child has two sets of parents? Can they objectively discuss this with a foster or adopted child?
- G. How does the family feel about the temporary nature of foster care and "letting a child go"?
- H. How does the family view their role as "non-blood" parents? Does the family understand the nature and purpose of adoption and/or foster care?
- I. Do parents understand that being a foster parent does not guarantee the adoption of a child?
- J. What is their attitude toward biological parents who have voluntarily placed or released their children or who have had their children removed from their care?
- K. How will medical emergencies be handled? Does the applicant understand the responsibility to inform the agency immediately of medical problems, injuries, crisis incidents?
- L. Do they understand that the authority to make decisions concerning major surgery and other high risk procedures remains with the biological parents unless parental rights have been terminated or a court has given that authority to DSS? If DSS has that authority, then DSS must consent.

XXII. Family Preference in Child (include information from Child Factor Checklist)

- A. Is family applying for a specific child and do not want to be considered for other children?
- B. For how many children would the family like to be licensed/approved?
- C. What age range are they interested in? Do they understand how the age of a child placed may affect the family dynamics, e.g. oldest biological child no longer the oldest, or the youngest no longer the baby, and losing that role in the family?
- D. What are the handicaps, behavior, maltreatment background, family background, medical problems, emotional problems which a family can or cannot accept? (Use Child Factor Checklist)
- E. What is the family's understanding and acceptance of openness between birth parents/siblings and children? Describe the type of openness which the family could accept.
- F. What is the family's understanding of children's normal behavior? What about implications of parenting children with certain problems?
- G. If parents initially expressed an interest in younger children but now want older children, explain.
- H. If applicants expresses interest in a transracial placement, how do they plan to handle issues related to parenting a child of another race such as maintaining cultural identity and background as well as acceptance of the child by other family members and the community?
- I. How much notice will the family require prior to placement?
- J. What is the applicant's understanding and acceptance of legal risk?
- K. Would the family agree to be licensed as foster parents for a specific child whose permanent plan is TPR/Adoption?
- L. Willingness to maintain contact between the adopted child and his biological family and/or siblings.
- M. Understanding of the adoptive child's need to know about their past and potential for searching out birth parents in the future.

XXIII. Recommendation

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- A. Address family's overall motivation and understanding of the purpose of foster care and/or adoptions and their ability to provide quality foster care or adoptive services. Discuss family's willingness to share information. Identify the family's strengths and weaknesses. Assess the family's understanding of developmental needs and skills of children and an understanding of the dynamics of child abuse and neglect. (If family is being assessed/licensed for a specific child, analyze if this family has sufficient resources, preparation, and overall capacity to protect, nurture, and provide for the child on a daily basis, short or long term.) Describe the type of agency support that may be needed.
- B. Recommend approval or denial. If making an approval, make recommendation of the type child(ren) for whom this family could provide care, and behaviors that can and cannot be accepted, number of children, sex, and age range. If they want a special needs child, what makes family suitable? (Homes should not routinely be licensed for "birth-18" but for the specific age child as determined by the assessment process. If making a denial, explain reasons and how this was discussed with family and the family's reaction.

XXIV. Signatures (self explanatory)

438 Reapplication Summary Outline

Revision Number: 04-03, Effective Date: 07/23/2004

1. Cover Page

Adoptive Applicants

	Applicant	Applicant
--	-----------	-----------

Name:
Address:
Place of Birth:
Physical Description:
Hair:
Eyes:
Height:
Weight:
Race:

Children in the Home

	Child	Child	Child	Child
--	-------	-------	-------	-------

Name:
DOB:
Relationship:
Birth/Adopted:

Others in the Home

Name(s)/Relationship:

Description of the Home

Acceptance Factors

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

(Include special needs, age, legal risk, number of siblings, race)

2. **Current Situation**

Include employment, work hours, child care arrangements, marital status, health of each family member, current finances and income, church or community involvement, housing situation, space available, and sleeping arrangements for additional children. **Is any member of the household a paramour of the adoptive parent?**

Address any situation that was a concern in the original home study. Address changes in family composition, including significant death and/or loss.

Include results of current SLED/CPS/FBI checks.

3. **Marriage**

Describe how adoption has impacted the family and marital relationship. Have roles within the family changed? If so, how? Describe the acceptance of adopted children by extended family members.

4. **Parenting Experience**

Address the previous adoption. Describe in detail how the family has adjusted to parenting, the special needs of the child(ren), the services the family is utilizing, and discipline methods. How is the family addressing adoption issues with the adopted child(ren) and the rest of the family? Talk to each child in the home and describe their feelings about adoption, the decision to adopt again, and how well they understand adoption. List each child's interests and activities. Include school names, grades, and the child's performance in school, academically and socially. Describe each child's personality so adoption specialists can evaluate the type of child who will best fit into the existing family.

5. **Family Preferences**

What type of child does this family want to adopt? List special needs and ages that family will accept. Address legal risk, openness, daycare plans, and readiness to adopt. Address what preparation the family will need to make before placement. How will the family handle jealousy between the child and previously adopted children? Why does the family want to adopt again?

6. **References**

Contact two (2) references who have known the applicant(s) for the past three years and who were not used as references during the initial application/approval.

7. **Summary/Recommendations**

Give a summary of family, their motivation to adopt, and the type child they want to adopt. List family strengths and any concerns. Give your recommendation regarding the family's approval.

Submitted by

Certified Investigator

Date

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

439 Guidelines for Denial of Adoptive Family Approval

Revision Number: 03-03, Effective Date: 11/18/2003

The following factors are assessed to determine the adoptive applicant's readiness and ability to parent a child until the child reaches adulthood, including evaluation of adoptive parent's ability to meet the changing needs of a child as the child ages:

I. Health

- A. Decreased life expectancy;
- B. Physical handicap that impacts applicant's ability to care for a child;
- C. Live threatening health problems.

II. Financial

- A. Monthly income does not exceed monthly expenses by a wide enough margin to meet the needs of an adopted child (NOTE: this is a basis for denial);
- B. Unstable work history.

III. Emotional

- A. Inability to deal with stress;
- B. Alcohol or other drug addiction;
- C. Lack of supportive interpersonal relationships;
- D. Past or present problems where therapist gives applicant a poor prognosis for parenting.

IV. Inappropriate Motives for Adoption

- A. To replace a deceased child (for example, client requests that adopted child be same age as the deceased child would have been);
- B. To improve an unsatisfactory marriage/relationship;
- C. To provide a companion to another child or to care for the applicant.

V. Marriage/Relationship

- A. Inability to resolve conflict;
- B. Poor communication;
- C. Evidence of existing physical or emotional cruelty or adultery.

VI. Lack of Commitment by Either Spouse/Partner

- A. Lack of participation in the adoption preparation process;
- B. One spouse/partner pursuing adoption to please the other spouse/partner;
- C. Lack of support of spouse/partner for the adoption process if only one spouse/partner is adopting.

VII. Nonacceptance of Birth Parents' and Child's Backgrounds

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- A. Lack of understanding birth parent(s)' motives in relinquishing child for adoption or circumstances of birth parent(s) who cannot parent;
- B. Negative labeling of birth family;
- C. Refuses to tell child he/she is adopted;
- D. Refuses to share information with the child about the child's birth/background.

VIII. Arrest History and Protective Services Complaint History

- A. Central Registry check reveals an indicated case of child abuse and/or neglect (DSS cannot approve application);
- B. The State Law Enforcement Division (SLED), FBI, or Sexual Offender Registry check reveals conviction or plea of nolo contendere for one or more of the following (DSS cannot approve the application):
 - 1. An "Offense Against the Person" as provided for in Chapter 3, Title 16 of SC Code of Laws;
 - 2. An "Offense Against Morality or Decency" as provided for in Chapter 15, Title 16 of SC Code of Laws;
 - 3. Contributing to the delinquency of a minor as provided for in Section 16-17-490;
 - 4. The common law offense of assault and battery of a high and aggravated nature when the victim was a person seventeen years of age or younger;
 - 5. Criminal domestic violence, as defined in Section 16-25-20;
 - 6. Criminal domestic violence of a high and aggravated nature, as defined in Section 16-25-65;
 - 7. A felony drug-related offense under the laws of this State.
- C. For other crimes, each situation will be individually assessed. Behaviors and situations, which are symptomatic of severe problems, will be reasons for denial. The adoption supervisor and administrator must concur that an adoptive applicant will be denied. Applicants who are denied will be provided a written explanation of the reasons and a written notice of their right to appeal the denial through the agency's fair hearing process. However, if the application is to adopt a specific child, the applicant must appeal the denial of approval by filing an adoption action in Family Court.

440 Adoption Expenses

Revision Number: 03-03, Effective Date: 11/18/2003

The legislation that merged the South Carolina Children's Bureau and the South Carolina Department of Social Services, Section 20-7-2340, provided that: (1) The Department shall establish charges for certain adoption and related services, (2) Any charges should be based on an income scale with no family denied services because of an inability to pay, (3) No charges could be made for the placement of special needs children and (4) 75% of any monies collected must be used to pay medical and maternity expenses of Birth Parent Services clients who have no other means of paying those expenses. All expenses for families whose income is below the SSBG eligibility level are automatically waived. Expenses for other families may be waived or reduced under extenuating circumstances, upon approval by the Director of Adoption. The following adoption expenses were established pursuant to this legislation:

Application

Applicants for infants and preschool children	\$25.00
Applicants for interstate services	\$50.00
Applicants for intercountry services	\$75.00

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Home Study

Group preparation	\$175.00
Individual preparation (by permission)	\$300.00

Post-Placement Services

<u>Family Income</u>	<u>Charge</u>
Less than \$13,000	None
\$13,000 – 14,999	\$200.00
\$15,000 – 16,999	\$300.00
\$17,000 – 19,999	\$400.00
\$20,000 – 22,999	\$500.00
\$23,000 – 25,999	\$600.00
\$26,000 – 28, 999	\$700.00
\$29,000 – 31,999	\$800.00
\$32,000 – 34,999	\$900.00
\$35,000 – 37,999	\$1000.00
\$38,000 – 40,999	\$1,150.00
\$41,000 – 43,999	\$1,250.00
\$44,000 – 46,999	\$1,350.00
\$47,000 - 49,999	\$1,450.00
\$50,000 – 51,999	\$1,550.00
\$52,000 – 53,999	\$1,650.00
\$54,000 and above	\$1,750.00

Other Adoption Services

Certain adoption expenses were approved prior to the March 16, 1988 effective date for the expenses outlined above. The Department charges independent Certified Investigators \$15.00 for adoption investigation certification; \$15.00 for certification to take relinquishments and consents; \$20.00 for dual certification; and \$15.00 for recertification, dual or single.

441 Medical Consent Cover Letter Requesting Consent from the County Director, MTS Director, MTS Regional Director or Adoptions Administrator

Revision Number: 03-03, Effective Date: 11/18/2003

Requesting Medical Consent from the County Director, MTS Director, MTS Regional Director or Adoptions Administrator

DATE: _____ **URGENT RESPONSE NEEDED**

TO: County Director, MTS Director, MTS Regional Director, or Adoptions Administrator

FROM: _____ Phone: _____

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

_____ Phone: _____

RE: Medical consent for _____, DOB _____

Projected date for medical treatment: _____

Physician's name: _____ **Phone number:** _____

Checklist of necessary information:

- _____ 1. Court order that grants the agency the authority to consent for this treatment, a court order that terminates parental rights, or executed relinquishments.
- _____ 2. Nature of the proposed medical procedure (in plain English); whether it will be performed on an inpatient or outpatient basis; whether general or localized anesthesia will be used.
- _____ 3. Significant risks presented by the procedure.
- _____ 4. Why the doctor believes the procedure is needed, and the anticipated result of the procedure.
- _____ 5. If the child has been in foster care four (4) months or longer with the same foster parents, whether the foster parents feel the procedure should be performed and, if not, why.
- _____ 6. Physician's/hospital's consent forms (if applicable).

441.01 Medical Consent Cover Letter Requesting Medical Consent from the State Director
Revision Number: 03-03, Effective Date: 11/18/2003

Requesting Medical Consent from the State Director

DATE: _____ **URGENT RESPONSE NEEDED**

TO: Division of Human Services, State Office

FROM: _____ Phone: _____

_____ Phone: _____

_____ Area Adoption Office

RE: Medical consent for _____, DOB _____

Projected date for medical treatment: _____

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Physician's name: _____ **Phone number:** _____

Checklist of necessary information:

- _____ 1. Court order that grants the agency the authority to consent for this treatment, a court order that terminates parental rights, or executed relinquishments.
- _____ 2. Nature of the proposed medical procedure (in plain English); whether it will be performed on an inpatient or outpatient basis; whether general or localized anesthesia will be used.
- _____ 3. Significant risks presented by the procedure.
- _____ 4. Why the doctor believes the procedure is needed, and the anticipated result of the procedure.
- _____ 5. If the child has been in foster care four (4) months or longer with the same foster parents, whether the foster parents feel the procedure should be performed and, if not, why.
- _____ 6. Physician's/hospital's consent forms (if applicable).

NOTE: CONTACT BY PHONE A REPRESENTATIVE AT THE STATE OFFICE (DIVISION OF HUMAN SERVICES) TO GIVE ADVANCE NOTICE THAT FAXED DOCUMENTS ARE BEING SENT FOR THE APPROVAL OF THE STATE DIRECTOR.

442 Adoption Subsidy Handbook
Revision Number: 03-03, Effective Date: 11/18/2003

442.01 Introduction
Revision Number: 03-03, Effective Date: 11/18/2003

The Department of Social Services has a responsibility to secure permanent homes for children in agency custody for whom adoption is the permanent plan. Adoption subsidy has allowed many children to have families of their own because it provides a mechanism to assist adoptive families in offsetting some of the expenses needed to meet the needs of the children.

Purpose

This handbook has been designed to help the adoption specialist, understand adoption subsidies and the process involved in obtaining adoption subsidy. It also provides an overview of other resources available for meeting a child's special needs.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Goals

This Handbook is designed to help the adoption specialist:

1. understand the subsidy process and how it helps the adoptive family and the child whom they adopt;
2. be familiar with all assistance to which the family may be entitled, based on eligibility;
3. find information which will assist the specialist in making decisions about the child's needs;
4. fill out all necessary forms using the explanations, instructions, and samples provided;
5. write all necessary summaries using the explanations, instructions and samples provided;
6. have a reference for locating area resources for services and assistance;
7. assess potential problems arising from certain events in the child's life; and
8. ensure that the adoptive parents have access to such information as the Department has been able to locate concerning the child and the subsidy/benefits to which the child may be entitled.

Role of Adoption Specialist

As an adoption specialist you will attempt to place the child in a home that best meets the child's needs. In order to achieve this goal, gathering all information that is available about the child is an important part of the process. Adoptive families will have access to the information covering the history and background that you find on a child. The information will be shared with the family in order to assist them in deciding whether or not this is a child they can parent successfully.

Special needs children are entitled to adoption related Medicaid programs. Adoption specialists are responsible for helping their families obtain a Medicaid card in the child's adoptive name. Confidentiality should be maintained if possible.

Adoption specialists should inform the adoptive family that Supplemental Benefits for Medical Assistance (medical subsidy) funds should be tapped after their primary coverage has been exhausted (whether private insurance or Medicaid.)

To further assist potential adoptive families, the Adoption Specialist will inform them as to the availability of financial assistance for eligible children, such as monthly adoption assistance subsidies, reimbursement of non-recurring costs, SSI or Social Security benefits, Supplemental Benefits for Medical Assistance (for children placed by the Department), and Medicaid eligibility.

Both federal and state laws dealing with adoption subsidy require that the adoptive family be notified of the availability of funds.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

442.02 Considering Adoption Subsidy

Revision Number: 03-03, Effective Date: 11/18/2003

442.02.01 Special Needs Definition

Revision Number: 03-03, Effective Date: 11/18/2003

A legally free child for whom reasonable but unsuccessful efforts have been made to place without subsidy except where it would be against the best interest of the child because of significant emotional ties with foster parents and the child meets one or more of the following criteria:

1. a white child ten years old or older;
2. a black or mixed-race child six years old or older;
3. a physically, mentally or emotionally handicapped child or a child at risk for physical, mental or emotional handicaps due to a condition existing before adoption;
4. a member of a white sibling group of three or more children, one of whom is at least six years of age, or a sibling group of four or more white children of any age;
5. a member of a black or mixed-race sibling group of two or more children, one of whom is at least six years of age, or a sibling group of three or more black or mixed race children of any age;
6. a member of a sibling group that includes a special needs child.

442.02.02 Efforts to Place without Adoption Subsidy

Revision Number: 03-03, Effective Date: 11/18/2003

The requirement to attempt to place a child without subsidy can be met in several ways:

1. The adoption specialist may tell the prospective family selected for the child about the child's background and condition and ask whether or not the family is willing to adopt without adoption subsidy. If they **indicate they cannot**, then the requirement for a reasonable but unsuccessful attempt to place the child adoptively without providing adoption subsidy has been fulfilled.
2. Many children are **known to be difficult** to place without a subsidy. In those cases, the requirement can be met by stating that, "In the past efforts to place such a special needs child who has or is (*List the special factor or condition.*) have failed without subsidy."

That statement must be in the Adoption Subsidy Summary.

3. The requirement can also be met by recruitment of a home for the child through means such as "Seedlings" or other media resources.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

442.02.03 The Four Kinds of Subsidy

Revision Number: 03-03, Effective Date: 11/18/2003

1. Federally Funded Adoption Assistance (Title IV-E)

- a. Adoption Assistance is a federally funded **monthly maintenance payment** made to the adoptive family of a IV-E eligible child and can:
 - 1.) help the adoptive family meet the additional expenses of the child's special needs including, but not limited to, day care expenses, mileage to and from special programs or doctor's visits. The amount of the payment must be negotiated with the family by the adoption specialist and **cannot be greater** than the amount the child received in foster care prior to an adoptive family being identified.
 - 2.) be authorized for a \$0.00 amount with a referral for Title IV-E Medicaid.
 - 3.) be a "difficulty of care payment" (child had to receive accelerated rate while in foster care). Requests for this level of monthly payment may be made after finalization with proper documentation and evaluation.
- b. Adoption Subsidy Agreement must be **signed before finalization**.

2. Supplemental Benefits

- a. Supplemental Benefits (for children placed by the Department) are **state funded** and can be a **monthly maintenance payment or a one-time** payment. Special needs children who are not Title IV-E eligible and nonspecial needs children adopted by foster families can receive Supplemental Benefits payments.
- b. This payment can:
 - 1.) help the adoptive family meet the additional expenses of the child's special needs including, but not limited to, day care expenses, mileage to and from special programs or doctor's visits. The amount of the payment must be negotiated with the family by the adoption specialist and **cannot be greater** than the amount the child received in foster care prior to an adoptive family being identified.
 - 2.) be authorized for a \$0.00 amount with a referral for Supplemental Benefits related Medicaid, if the child has a medical or rehabilitative need.
 - 3.) be a "difficulty of care payment" (child had to receive accelerated rate while in foster care. Requests for this level of monthly payment may be made after finalization with proper documentation and evaluation.)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- 4.) be a one-time expense that cannot be covered under any other program. *For example*, specialized equipment for a physically handicapped child with a preexisting condition, not covered by any other program. Prior approval is required.

Adoption Subsidy Agreements for State Supplemental Benefits can be **signed before or after finalization**. Approval of requests for financial assistance after finalization may be granted if the special needs factor or condition was preexisting and the Department placed the child.

3. Supplemental Benefits for Medical Assistance (medical subsidy)

The adoptive family should be informed that if the amount of Supplemental Benefits for Medical Assistance is exceeded, the Department will not compensate anyone for the additional amount owed.

- a. Supplemental Benefits for Medical Assistance (SBMA) is a state funded program used for specific physical and emotional problems of special needs children for whom there are no other resources. These children **must** have been placed for adoption through the Department of Social Services.

These funds may cover medical, dental, and psychological counseling expenses that are not covered by Medicaid, private insurance or other resources.

- b. **All other resources should be exhausted** before the Supplemental Benefits for Medical Assistance request is made.
 - 1.) Routine medical expenses should be covered by the monthly maintenance payment, the family's own insurance or Medicaid.
 - 2.) Organizations for the handicapped, such as Easter Seals, Shriners Hospital, DHEC, and DDSN may provide services at little or no cost to the family. The family should be encouraged to use these resources before requesting medical subsidy.
 - 3.) Families must use Medicaid providers who can provide the specific services needed by the child, if available in the family's area.
 - 4.) SSBG services must be used, if available. This includes special services for the unmarried mother (maternity homes), child development services (day care), and post adoption services.
- c. The following **are not covered**:
 - 1.) learning related services, which can be provided by the school system;
 - 2.) routine physical exams;
 - 3.) routine dental exams and treatment.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- d. Payments will only be made for the conditions listed on the Adoption Subsidy Agreement. The provider must note on the bill that family insurance, other resources and Medicaid are not available. Payment may be made for the following:
 - 1.) psychological counseling, physical therapy, medical treatment or dental treatment (for extraordinary dental problems only) related to the factor or condition for which the Adoption Subsidy Agreement was signed;
 - 2.) equipment related to the factor or condition for which the Adoption Subsidy Agreement was signed;
 - 3.) one-time or occasional expenses, related to the factor or condition for which the Adoption Subsidy Agreement was signed, such as the installation of a wheelchair ramp;
 - 4.) other services or expenses, related to the factor or condition for which the Adoption Subsidy Agreement was signed, necessary to help the adoptive family meet the child's special needs.
- e. **Suggested amounts** to authorize per year to cover expenses for specific conditions listed on the Adoption Subsidy Agreement are:
 - 1.) Limit of **\$250** for counseling for child not in treatment at the time the Adoption Subsidy Agreement is signed.
 - 2.) Range of **\$1000 to \$2000**, according to estimate of therapist, for counseling for child in treatment at the time the Adoption Subsidy Agreement is signed.
 - 3.) Limit of **\$250** for medical treatment for child not receiving treatment at the time the Adoption Subsidy Agreement is signed.
 - 4.) Range of **\$1000 - \$2000**, according to physician's estimate, for medical treatment for child receiving treatment at the time the Adoption Subsidy Agreement is signed.
 - 5.) Limit of **\$2000** for general hospital bills.
 - 6.) Limit of **\$500 per year** for respite care.
 - 7.) Limit of **\$1000** for physical or occupational therapy.
 - 8.) Limit of **\$2000** for dental treatment, only for serious condition affecting child's mental or physical health.
 - 9.) Limit of **\$2000** for equipment and/or supplies.
 - 10.) Limit of **\$1000** for drugs.
- f. All residential treatment must be requested through the local adoption office.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- g. Area adoption administrators must approve all financial assistance requests before adoption subsidy funds of any kind are authorized.
- h. Any request for an amount exceeding the one suggested for the specific condition must be justified in writing and submitted to the Special Needs Administrator for approval.
- i. Payments must be processed quickly after being incurred and all bills must be submitted by July 1 for the previous fiscal year.
- j. Adoption Subsidy Agreements for Supplemental Benefits for Medical Assistance (medical subsidy) can be **signed before or after finalization**. Approval of requests for financial assistance after finalization may be approved if the special needs factor or condition was preexisting.

4. Nonrecurring costs

- a. Nonrecurring costs are certain one-time expenses connected with a finalized adoption, and may be paid when a family adopts a **special needs child**. They are defined as "**reasonable and necessary** adoption fees, **court costs**, **attorney fees** and other expenses which are **directly related** to the legal adoption of a child with special needs and which are not incurred in violation of State or Federal law." This may include mileage and lodging involved in visiting the child before placement occurs. These expenses cannot be reimbursed if they are paid for the parents by other sources such as an employer. Payment can be made directly to providers **or** to families as reimbursement.
- b. These costs are reimbursable up to **\$250** per child and are entered on the Adoption Subsidy Agreement.
- c. The child does not have to be in the custody of the Department to qualify.

442.02.04 Other Funding Sources

Revision Number: 03-03, Effective Date: 11/18/2003

1. Supplemental Security Income (SSI)

- a. Supplemental Security Income (SSI) is a federal welfare program that provides monthly payments to people who are elderly, blind or disabled and meet the resources and income requirements.

Adoptive families of SSI children have the option of receiving Adoption Assistance rather than SSI or both. SSI will be reduced dollar for dollar for any Title IV-E Adoption Assistance payment to the family. SSI is a needs based program. The child's SSI payment may be reduced or terminated after finalization when the family's income is taken into consideration.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- b. SSI is administered by the Social Security Administration which determines eligibility, makes payments to recipients, and maintains a master record of recipients.
- c. When a premature baby is born, he/she **may be automatically eligible for SSI**. Under the program's rules, very low birth weight babies automatically meet Social Security's definition of disability until they are at least a year old.
- d. Infants born before the 38th week of pregnancy are considered premature, and if they weigh less than 2,500 grams (about 5 pounds, 8 ounces), they are classified as low birth weight. Premature infants weighing less than 1,200 grams (2 pounds, 10 ounces) at birth are considered disabled. Premature infants weighing between 1,200 and 2,000 grams (about 4 pounds, 6 ounces) at birth may be considered disabled if they are small for their gestational age and have serious medical problems.

Low birth weight babies generally tend to remain in a hospital's intensive care unit for an extended period of time. The Supplemental Security Income rules don't count the parents' income and resources in determining the child's SSI eligibility or payment amount until the month following the month the child comes home to live with its parents. Many of these children remain eligible for SSI after they return home if they and their parents have limited income and resources. If the child comes into foster care, the child would remain eligible based on their eligibility at birth.

2. Medicaid

Medicaid is a medical assistance program, which pays some medical bills for eligible people with low income. The cost is shared by the state and federal government. In South Carolina the rate is approximately 30% for state, and 70% for federal. Under the Supplemental Benefits program, DSS has to pay the state match for Medicaid.

Confidentiality must be maintained. The adoption specialist should retrieve the foster care Medicaid case as soon as the child is placed in an adoptive home. Use a medical record in the child's new name as verification of birth and a completed SS-5 that will be held in the record as described in Directive Memo, D91-150. A pseudo social security number is used for Medicaid until the adoption is legalized. After the family has gotten a new social security number for the child, update the Medicaid case with this new number. Medicaid can be rebilled for Targeted Case Management services provided during the adoption supervisory period. The foster care Medicaid case should be filed with the adoption record and sent to state office to be sealed after finalization.

a. OCWI (Optional Coverage for Women and Infants) (Category 88)

This program provides Medicaid coverage to pregnant women, infants and children up to age 11. Adoptive parents' income is not counted until the adoption is legalized.

b. Medicaid for Title IV-E (Category 51)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

A child who is covered by a Title IV-E Adoption Subsidy Agreement is automatically eligible for Medicaid coverage, even if they do not receive a monthly payment.

c. Medicaid for Supplemental Benefits (Category 13)

Special needs children with a medical or rehabilitative need may receive Medicaid coverage. They are eligible if they are under 21, have a special medical or rehabilitative need which existed prior to entering into the Adoption Subsidy Agreement and the placement could not have been made without the subsidy, and meet the AFDC income and resources limits at the time the Adoption Subsidy Agreement is initiated. The adoptive parents' income and resources are disregarded. The child is eligible as long as the Adoption Subsidy Agreement is in effect.

3. Social Security benefits

Social Security benefits are received as the result of a connection to the work force. Children receive these benefits when the parent, who has contributed to Social Security, dies or becomes disabled.

The adoption specialist needs to investigate the possibility that the child is eligible for these benefits when the child is referred for placement. If it appears that the child may be eligible, the adoption specialist is responsible for applying for these benefits. The child will continue to receive these benefits even after finalization. It is important that the adoption specialist make an application for these benefits before the final hearing. After the adoption is finalized, it is difficult to apply because of the issues of confidentiality.

When the child is receiving Social Security benefits from the birth parents, those benefits are considered in the negotiation for the subsidy payment, which can be no more than the child received in foster care, and are reduced dollar for dollar. *For example*, if the child is receiving \$332.00 per month and he/she is eligible for and receiving \$100.00 per month in Social Security benefits, the child would receive \$232.00 in adoption subsidy per month.

Should the child start to receive Social Security benefits after finalization based on the adoptive parent's death or disability, the monthly cash payment would be renegotiated with the family based on the needs of the child and the resources available. The monthly cash payment may be terminated, reduced or continued at the same rate. An individual assessment will be made on each case based on negotiation with the family. If the family disagrees with the reduction or termination, they are entitled to a Fair Hearing.

4. SSBG services

a. SSBG services are available, though limited, through the Department of Social Services for adopted children covered by Title IV-E Adoption Assistance. Services are also available to income eligible clients.

b. Some of the services are:

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- 1.) Child Development Services (day care).
- 2.) Special Services To Unmarried Mothers (maternity home).
- 3.) Services for individuals with mental retardation.

442.03 Evaluating the Need for Adoption Subsidy
Revision Number: 03-03, Effective Date: 11/18/2003

442.03.01 Adoption Subsidy
Revision Number: 03-03, Effective Date: 11/18/2003

While it is imperative that adoption subsidy be used to help meet the needs of each special needs child placed for adoption, it is likewise imperative that the adoption subsidy received be realistically determined. By not subsidizing unnecessarily, the agency can ensure that the special needs children and families of the future will also have access to adoption subsidy funds.

An adoption subsidy can be paid to the adoptive parents of a special needs child or of a nonspecial needs child adopted by foster parents. The need for adoption subsidy is **assessed on an individual basis** once a family has been chosen. Although the Department is not obligated to provide an adoption subsidy in every case, it is obligated to inform adoptive families of the availability of funds. The Department must negotiate a subsidy if requested.

It is understood that assuming the responsibility of a new family member will affect the family's existing lifestyle and cannot be totally offset by payment of adoption subsidy. The adoptive family must be able to meet the financial needs of their existing family and should be able to meet the day-to-day expenses of the adoptive child. Adoption subsidy is not a mechanism for assuming all normal expenses, but is intended to contribute towards these expenses and **must be used for the benefit of the child being placed**. Adoption subsidy can be paid to the adoptive family from the date of placement of legally free children.

The initial discussion of adoption subsidy should occur at the preplacement conference. At this time a visitation schedule will be discussed. The adoptive family should be asked to pay close attention to the increased expenses of having the child in their home. It might be helpful for them to list and compare expenses prior to and during the visitation period. Adoption subsidy should be based on the additional expenses incurred in meeting the child's special needs, that is, doctor's appointments, counseling, special equipment or adaptations to the home.

The Adoption Subsidy Agreement should be prepared and then **signed** by both the parents and an agency representative **prior to payment** being put in place and **prior to the finalization** of the adoption. If the child is not legally free, the Adoption Subsidy Agreement should show the date payments will be initiated, such as *upon*

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

finalization or upon TPR. Payment should never begin before an agency representative has signed the agreement.

The DSS-1573 Financial Information Form that is completed at the time of application for adoption should be reviewed very carefully to avoid placements that are not stable and that may subject the child to pressure that goes with an unstable financial situation. The questions are very basic, and an adoption specialist does not have to be an accountant to assess the financial stability of a proposed adoptive family.

Once the family has been selected, the Monthly Expenditures section of the form should be reviewed to include the child's expenses. This will assist the family and the adoption specialist in determining what expenses the current income will cover and how much financial assistance is needed.

1. Review and assessment of the DSS 1573

The adoption specialist should do the following:

- a. ask that the applicant submit the most recent W-2 forms and provide income tax returns for confirmation and information;
- b. ask applicant's permission to contact sources, such as the applicant's employer, to verify length of employment and current salary to confirm information provided;
- c. offer to assist applicant, if necessary;
- d. check for (1) copy of W-2 forms, (2) income tax return, (3) letters from banks or creditors, if necessary;
- e. compare the income stated on the W-2 forms to that listed on income tax return. If these figures do not agree, contact the applicant and ask for clarification of the discrepancy;
- f. verify monthly mortgage/rent payments, and major installment loans with creditors;
- g. review monthly expenses listed for clothing, medical, school, etc., as to the appropriateness of the figures; and
- h. compare the listed income with monthly expenditures.

2. Evaluation of the DSS-1573.

- a. Do income figures support one another?
- b. Do monthly expenses exceed monthly income?
- c. Do monthly expenses seem realistic? If not, review the areas that are questionable.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- d. Does the family seem to have sufficient income to support the child?
- e. Will the placement of this child adversely affect the financial status of this family?
- f. Could this family meet this child's needs without an adoption subsidy?

442.03.02 Negotiation of the Adoption Subsidy

Revision Number: 03-03, Effective Date: 11/18/2003

The key word for any discussion on adoption subsidy is **negotiation**. When an adoptive family has been selected for a child negotiation begins at \$0 regardless of how much is currently being paid for the child's foster care. Explain to the family that we want to negotiate fairly what is needed to meet the child's needs. Using the *DSS Form 1573, Financial Information*, confirming the income and expenses, the adoption specialist and family should determine if there are sufficient resources to incorporate the child into the household without a subsidy. If there are not, it is the adoption specialist's responsibility to negotiate the amount needed. The negotiation should first include a discussion of the child's special needs and the resources needed to meet these needs. Pay close attention to evaluating the adoptive family's ability to provide for the child utilizing the family's resources first. The adoptive family should examine their own resources and, with assistance from the adoption specialist, decide on a reasonable amount needed in order to adopt the child. However, this amount may not exceed what the child received in foster care.

Keep in mind, there is no income test when determining whether or not a family receives an adoption subsidy. If the family is having difficulty arriving at the needed amount, the adoption specialist should take the lead in suggesting an amount. Ask the adoptive family to make new estimates of what their expenses will be and what assistance they feel they will need after the child is placed. In some cases, however, the adoption specialist may be more aware of the need for adoption subsidy above the family estimates because of the needs of the individual child.

In most cases, the child will have a visitation period with the adoptive family before placement occurs. Near the end of the period, the adoption specialist should meet with the family to finalize the negotiation of the adoption subsidy. The adoption specialist should complete the *Adoption Subsidy Negotiation Checklist* prior to the adoptive placement and get the Adoption Director's approval. An Adoption Subsidy Agreement should be signed for what is necessary to care for the child and meet his/her special needs.

Any income the child receives from Social Security or any other source should be counted when initially negotiating the amount of subsidy. If a child begins receiving continuous funds (such as Social Security benefits from the birth family) after the Adoption Subsidy Agreement is in effect, then the amount of subsidy should be renegotiated with the adoptive family. Based on the renegotiation, the amount of payment may be reduced, terminated or left the same.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

If a family is not informed as to the availability of adoption subsidy programs, and subsequently learn of them, the family has a right to a fair hearing if their request is denied. If the adoption specialist does not inform the adoptive family of the availability of **state funds**, the family may request a review and redetermination by the Special Needs Administrator.

442.03.03 Other Resources

Revision Number: 03-03, Effective Date: 11/18/2003

1. Private health insurance

The family's own insurance which might cover some medical expenses from the date of placement. The family should contact their insurance carrier to determine if the child will be covered and if so, exactly what will be covered. Insurance companies differ, so it is important for the family to verify the child's eligibility before adoptive placement.

2. Medicaid

The adoption specialist should facilitate Medicaid coverage during the supervisory period. Children for whom there is an Adoption Subsidy Agreement in place are automatically eligible.

3. Public resources

All available public resources should be investigated which would preclude the need for adoption subsidy; *for example*, day care facilities for handicapped children. School age children may be eligible for special programs, such as speech remediation, in the school district where they attend classes.

4. Child's income and resources

The child may have income and/or resources, such as Social Security benefits, VA benefits or trust funds.

442.04 Adoption Subsidy Summary

Revision Number: 03-03, Effective Date: 11/18/2003

After the adoption subsidy has been negotiated, the adoption specialist prepares an **Adoption Subsidy Summary** stating the detailed problems of the child, the efforts to place the child without subsidy, circumstances of the adoptive family, negotiation of the adoption subsidy, the amount of the monthly payment or other types of payments (if any) and the conditions to be covered. Supplemental Benefits for Medical Assistance is authorized for a specific amount per year.

Documentation of the child's special needs factor or condition should be included in the case record. *For example*, if both parents are schizophrenic and the adoption subsidy is for emotional problems, the case record

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

must contain documentation on both parents showing the history of each and exactly why the child is at risk. This information is always shared with the adoptive parents using the *Background Summary*.

The adoption specialist's supervisor and area administrator review the Adoption Subsidy Summary and approve or deny it. Signing the summary and face sheet reflects approval. There is a **sample** Adoption Subsidy Summary on the following page:

B. Sample

Adoption Subsidy Summary
for
Lucy Lastname
DOB: 2/9/92 DSS# 123456789 Award # 12345
Is Title IV-E Eligible
To Be Placed in the Adoptive Home of
Jack and Jane Doe
Any Town, SC 29000
Any County, AH-12345

This is to request that Adoption Assistance payments and Supplemental Benefits for Medical Assistance (SBMA) payments be paid to Mr. and Mrs. Doe, an approved adoptive family, beginning with the date of Lucy's adoptive placement.

The adoptive mother is not employed, and she plans to devote all of her time to home and family needs. The adoptive father is an independent contractor, and his income of \$63,000 per year is not sufficient to provide for all of Lucy's special needs. In addition to Lucy, the adoptive family has a three year old birth child and two other special needs adoptive children for whom they receive subsidy.

Lucy is a ten-year-old mentally handicapped, hyperactive child who requires behavior modification. Lucy currently functions in the six-year-old age range with an I.Q. of 60 and receives SSI for her disability.

Lucy was featured in the *Seedlings* Book and on television in an attempt to find her an adoptive home. In the past, placement of a child with similar conditions would not have been possible without offering an adoption subsidy. Lucy is legally free for adoption.

Based on the negotiation with Mr. and Mrs. Doe, a monthly payment in the amount of \$300 is requested. The applicable monthly foster care rate for Lucy is \$339.00. The subsidy payment will begin when the adoption is finalized and SSI is terminated.

Adoption subsidies are requested in the following amounts:

- | | |
|------------------------------|---|
| 1.) Monthly payment: | \$300.00 per month, Adoption Assistance |
| 2.) SBMA: Mental Retardation | \$1000 per year |
| 3.) Nonrecurring Costs: | \$250.00 |

Verification of IV-E eligibility is attached.

Recommended: _____
(Adoption Specialist) (Date)

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Approved: _____
(Area Supervisor) (Date)

Approved: _____
(Area Administrator) (Date)

442.05 Eligibility

Revision Number: 03-03, Effective Date: 11/18/2003

Children who are placed for adoption may be eligible for federal or state funding.

Provided the **State has determined that the child cannot return** to the home of the birth parent, the financial payment for **Title IV-E** Adoption Assistance may be put in place as soon as either the DSS 30113, Agreement to Place Child in Preadoptive Home, or the DSS 3025, Agreement to Place Child in Adoptive Home, is signed. This requirement is met when the Termination of Parental Rights (TPR) complaint has been filed.

Provided the child is **legally free** (relinquishments from all parents, TPR by the court or a combination), the financial payment for **Supplemental Benefits** may be put in place as soon as either the DSS 30113, Agreement to Place Child in Preadoptive Home, or the DSS 3025, Agreement to Place Child in Adoptive Home, is signed.

442.05.01 Federally Funded Adoption Assistance (IV-E)

Revision Number: 03-03, Effective Date: 11/18/2003

All new adoption cases must be evaluated for Title IV-E eligibility.

To receive federally funded Adoption Assistance, a child must:

1. Meet the criteria for **Title IV-E eligibility** based on AFDC, both at the time of removal and at the time the adoption complaint (petition) was filed;

OR

2. Be adopted by a **specified relative** and met the AFDC financial need and deprivation requirements at the time the adoption complaint was filed;

OR

3. Have received or had been approved for **SSI** at the time the adoption complaint was filed

OR

4. Be eligible due to **prior Title IV-E** adoption assistance eligibility and meet the definition of a child with special needs. This applies usually in the case of an adoption disruption or dissolution.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

INITIAL DETERMINATION OF TITLE IV-E ELIGIBILITY BASED ON AFDC:

Cases which are determined to be eligible for Title IV-E based on AFDC must be evaluated twice: at removal from the biological family and again within 30 days of the time the adoption complaint (petition) is filed. Use DSS 3050A to determine at the time adoption complaint is filed.

The eligibility criteria are:

- a. In the month the child entered foster care, the child must have been receiving or been eligible to receive AFDC;

AND
- b. On the date the child last entered DSS foster care status, he/she was (1) living with the parent or specified relative, or (2) had lived with a parent or specified relative in the 6 months prior to voluntary placement or initiation of the court proceedings;

AND
- c. The child was placed into foster care status by (1) a judicial determination OR (2) a Voluntary Placement Agreement.
 - 1.) If the child was placed into foster care by **judicial determination**, a complaint must have been filed within 6 months of the last day the child was living with a parent or specified relative, and was followed by an **initial court order** which contains the proper language.
 - 2.) If the child was placed into foster care through **voluntary placement**, the Voluntary Placement Agreement must be signed by the parent or legal guardian and must be followed within 180 days (not 6 months) of the placement by a properly worded court order placing the child into foster care status.
Title IV-E foster care payments must have been paid some time during the period between the signing of the Voluntary Placement Agreement and the signing of the subsequent court order for the child. The child must be under the State agency's responsibility for placement and care or that of another public agency with whom the State has an agreement.
AND
- d. the child has been determined to be a **special needs child**.

**DETERMINATION OF TITLE IV-E ELIGIBILITY IN AN ADOPTION BY A SPECIFIED
RELATIVE:**

Cases which are determined to be eligible for Title IV-E based on adoption of the child by a specified relative are evaluated once: at the time the adoption complaint is filed.

The eligibility criteria are:

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- a. The child is being adopted by a **specified relative** as defined by AFDC criteria;
AND
- b. The child is **deprived** of parental care and support at the time the child left the home of the birth parents
AND
- c. At the time the adoption complaint is filed;
 - 1). the child meets the criteria for **AFDC** eligibility;
AND
 - 2) the child has been determined to be a **special needs child**.

DETERMINATION OF TITLE IV-E ELIGIBILITY IF THE CHILD RECEIVED OR HAD BEEN APPROVED FOR SSI PRIOR TO THE FINALIZATION OF THE ADOPTION:
When a child receives or has been approved for SSI, the manner in which the child came into care is not significant or necessary to prove.

The eligibility criteria are:

- a. The child is **receiving SSI** at the time the adoption complaint is filed;
OR
- b. The child has been **approved for SSI** at the time the adoption complaint is filed;
AND
- c. The child has been determined to be a **special needs child**.

Documentation of SSI must come from the Social Security Administration and a copy must be in the file.
THE CHILD IS ELIGIBLE DUE TO PRIOR IV-E ADOPTION ASSISTANCE ELIGIBILITY AND MEETS THE DEFINITION OF A CHILD WITH SPECIAL NEEDS.

442.05.02 Supplemental Benefits
Revision Number: 03-03, Effective Date: 11/18/2003

For those children placed by the Department who do not meet the criteria for Title IV-E, state funded Supplemental Benefits are available. Supplemental Benefits can be a monthly maintenance payment or a one-time payment.

- 1. Determination of eligibility for **special needs** children who are not eligible for Title IV-E:
The eligibility criteria are:

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

- a. The child must meet the special needs definition;

AND

- b. The child meets the age requirements:

- 1.) the child is under the age of eighteen;

OR

- 2.) the child is between the age of eighteen and the age of twenty-one, has proof of school attendance, and is financially and legally dependent upon the family;

- 2. Determination of eligibility for **nonspecial needs** children bonded to and adopted by foster families:

The eligibility criteria are:

- a. The child is legally free,

AND

- b. The foster family to whom the child is bonded could not adopt without the assistance.

442.05.03 Supplemental Benefits for Medical Assistance (Medical Subsidy)

Revision Number: 03-03, Effective Date: 11/18/2003

Supplemental Benefits for Medical Assistance (SBMA) are state funds used for medical or rehabilitative problems of **special needs** children for whom there are no other resources.

The eligibility criteria are:

- 1. The child must meet the special needs definition;

AND

- 2. The child meets the age requirements:

- a. the child is under the age of eighteen;

OR

- b. the child is between the age of eighteen and twenty-one, has proof of school attendance and is financially and legally dependent upon the family;

AND

- 3. There are no other resources to meet the medical needs of the child.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

442.05.04 Nonrecurring Costs

Revision Number: 03-03, Effective Date: 11/18/2003

When a family adopts a **special needs child**, the adopting parents are entitled to be reimbursed for their expenses connected with the adoption.

Determination of eligibility:

The eligibility criteria are:

1. The child must meet the special needs definition;
2. An Adoption Subsidy Agreement is in place before the adoption is finalized;
3. The expenses have not been incurred in violation of state and federal law.

In addition:

4. The child need not be eligible for Title IV-E funds;
5. The family does not have to meet a means test;
6. The child does not have to be in the custody of the Department.

442.06 Post Legal Requests for Subsidy

Revision Number: 03-03, Effective Date: 11/18/2003

There are two ways a family can request financial assistance after finalization. The procedure depends on the child's eligibility.

When an adoptive family needs financial assistance after finalization, and the **Department has placed** the child for adoption, they may be eligible for assistance. The worker must establish that the child meets the criteria for Supplemental Benefits; that is, the child has a preexisting mental, physical or emotional handicap and there is documentation that the Department placed the child with the family for the purpose of adoption.

The worker should fill out a **Post Legal Request** for Supplemental Benefits and/or Supplemental Benefits for Medical Assistance. All post legal requests are submitted to the Special Needs Administrator.

442.06.01 Post Legal Request for Supplemental Benefits and/or Supplemental Benefits for Medical Assistance

Revision Number: 03-03, Effective Date: 11/18/2003

A post legal request for adoption subsidy should be submitted to the Special Needs Administrator, along with the Adoption Subsidy Negotiation Checklist. This request should include: **(1)** the presenting problem and specific request for subsidy, **(2)** the background, **(3)** and the recommendation. The worker must negotiate with the family in regard to the amount of the monthly payment. It must be signed and dated by the adoption

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

specialist and the administrator. (See sample Post Legal Request for Supplemental Benefits on the next page). The Special Needs Administrator and the Supervisor of Adoption Services will make a recommendation and forward the Adoption Subsidy Negotiation Checklist to the Adoption Director for signature.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

Sample:

POST LEGAL REQUEST FOR SUPPLEMENTAL BENEFITS

Susie Lastname

PRESENTING PROBLEM:

Larry L. and Mazie Lastname are requesting Supplemental Benefits and Supplemental Benefits for Medical Assistance for Susie. They have been involved with the Post Legal program in Area VII since October 1992. The family is requesting monthly payments in order to better meet Susie's needs. The child has been diagnosed with Attention Deficit Disorder with Hyperactivity (ADDH). She is in the second grade and is experiencing difficulty keeping up with her school work. They are also requesting \$2000 per year to cover therapy.

BACKGROUND:

Susie was sexually and physically abused by her birth father and then by her mother's boyfriend. Her birth mother neglected her and her siblings and tied the children to the bed to keep them quiet. Susie's special factors and conditions were not identified prior to placement because she appeared to be functioning as a normal healthy child.

RECOMMENDATION

It is recommended that Mr. and Mrs. Lastname enter into an Adoption Subsidy Agreement with the agency for Susie for a monthly payment of State Supplemental Benefits in line with foster care board payments and Supplemental Benefits for Medical Assistance in the amount of \$2000.00 per year.

RECOMMENDED BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

442.06.02 Appeals

Revision Number: 03-03, Effective Date: 11/18/2003

The intent of the appeal process is to provide an adoptive family with notice of the basis for the Department's decision, and the opportunity for the family to be heard.

When there is no Adoption Subsidy Agreement in place and the child is only eligible for a federally funded program for Adoption Assistance, and/or nonrecurring costs, the appeals process must be used. These are children **not eligible for Supplemental Benefits; that is, not placed by the Department** for the purpose of adoption. The family must request assistance in writing. After receipt of the letter, the request will be denied, and the family will be informed of their right to an appeal.

South Carolina Department of Social Services
Human Services Policy and Procedure Manual

CHAPTER 4, Adoption and Birth Parent Services

ACYF PA 01-01 effective January 23, 2001 states that an Adoption Subsidy Agreement must be in place prior to finalization for a child to be eligible for Title IV-E Adoption Assistance and/or reimbursement of non-recurring costs.

Some allegations that constitute grounds for a fair hearing include: (1) failure of DSS to notify the adoptive family of the availability of subsidy funds for children in the State foster care system, (2) adoptive family disagrees with the determination by the State that a child is ineligible for adoption assistance, (3) relevant facts regarding the child were known by DSS or child-placing agency and not presented to the adoptive parents prior to the finalization of the adoption, (4) denial of assistance was based upon a means test of the adoptive family, (5) decrease in the amount of adoption assistance without the concurrence of the adoptive family, and (6) denial of a request for a change in payment level due to a change in the adoptive parents' circumstances.

The Individual and Provider Rights Division can deny a request, however, if it is not submitted within 30 days of written notice of the agency's decision.

442.06.03 Appeals Procedure

Revision Number: 03-03, Effective Date: 11/18/2003

The family must make the request for the hearing in writing to the Office of Administrative Hearings and Individual and Provider Rights (OAH) within thirty (30) days of receipt of written notification of the Department's decision to deny the adoptive family's request.

1. The OAH shall schedule a hearing to be held no sooner than thirty (30) days and no later than ninety days after receipt of the request for the hearing, unless continued. The hearing shall be conducted by a three-member committee consisting of a hearing officer and two members appointed by the State Director or his or her designee.
2. The final decision will be issued within thirty (30) days of the conclusion of the hearing and distributed by certified mail.